## 15000073112

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## **COVER LETTER**

TO: Registration Se Division of Co			
	EANING SERVICES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	CABALLEROS, EDNA M	-1	
		Name of Person	
	EDNA CLEANING SERV	VICES LLC	2
		Firm/Company	
	66W 45TH STREET		2021 AUG 19 SECRETAR TALLAH
		Address	
	JACKSONVILLE FL 322	08	SSE P
		City/State and Zip Code	E, FL
	E-mail address: (	to be used for future annual report not	flication)
For further information of	concerning this matter, please c	all:	
EDNA M. CABALLER	os	904 524-0901 at ( )	
Name c	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Co	porations
P.O. Box 632		The Centre of T	
Tallahassee,	r に 323 [4	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EDNA CLEANING SERVICES LE	.C			
(Name of the Limit	ed Liability Compa (A Florida Limited l	iny as it now appears Liability Company)	on ou <u>r records.</u> )	
The Articles of Organization for this Limited Li Florida document number 1.15000073112				and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liab	ility company her	<u>re</u> :	
EDNA'S PROS LLC				20°
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the de	signation "LLC" or	the abbreviation L.L.C.
Enter new principal offices address, if application	able:	66W 45TH STRI	EET	aug I
(Principal office address MUST BE A STREET ADDRESS)		JACKSONVILL	E F1 32208	
				SS 0
Enter new mailing address, if applicable:		66W 45TH STRI	EET	3: 01 EE, FL
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	JACKSONVILLI	E FL. 32208	1'1
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our re	cords, enter the	name of the new registered
Name of New Registered Agent:				
Nam Danistanad Office Address	66W 45TH STF	REET		
New Registered Office Address:	Enter Florida street address			
	JACKSONVILLE		Florida 32208 Zip Code	
	<u> </u>	Cuy		Zip Code
New Registered Agent's Signature, if changing R	legistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the r	er and complete stered agent as p registered office	performance of no provided for in Cl	ny duties, and L hapter 605, F.S.	am familiar with and Or, if this document is

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		<del></del>	□Remove
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			_ □Remove
			🗆 Change

EDNA M. CABALLERO 66W 45TH STREET, JA	ACKSONVILLE FL. 32208	
JOSE L. DUARTE 66W 45TH STREET, JAC	CKSONVILLE FL. 32208	
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fective date, if other than the date of filing:	(optional)	
n effective date is listed, the date must be specific and cannot be prote:  If the date inserted in this block does not meet the appicument's effective date on the Department of State's record	for to date of filing or more than 90 days after filing.) Pur dicable statutory filing requirements, this date will	suant to 605.026 not be listed a
ecord specifies a delayed effective date, but not an effective is filed.	e time, at 12:01 a.m. on the earlier of: (b) The 90	th day after the
ted August 10/2021		
	·	

E.

Filing Fee: \$25.00

Typed or printed name of signee