

L15000109375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

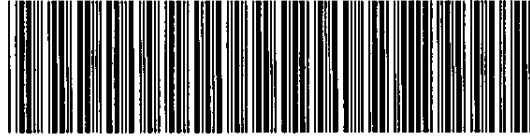
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 28 2015
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 JUL 27 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 8, 2015

ANGELA POLANCO
ORGANIZED PRO SERVICES
2542 SIMPSON RD
KISSIMMEE, FL 34744

SUBJECT: SPRINT CLEANING LLC
Ref. Number: L15000109375

We have received your document for SPRINT CLEANING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P14000041057 "SPRINT PAINTING, INC".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 315A00014220

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sprint Cleaning
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angela Polanco
Name of Person

Organizedpro Services
Firm/Company

2542 Simpson Road
Address

Kissimmee, FL 34744
City/State and Zip Code

Organizedpro Services@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Polanco at (407) 844-0670
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

July 9, 2015

I Carlos Alberto Osorio have no intentions to reinstate Sprint Painting Inc.
(P14000041057).

I would like to release the name. If you have any questions feel free to
contact my assistant

Angela Polanco 407-844-0670.

Sincerely,

A handwritten signature in black ink, appearing to read 'Carlos A. Osorio', written in a cursive style.

Carlos A. Osorio
407-709-0215

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Speint cleaning LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on June 24, 2015 and assigned Florida document number L15000109375.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Speint Painting LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: same

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: same

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 30, 2015

Carlos A. Osorio Jr
Signature of a member or authorized representative of a member

Carlos Alberto Osorio Jr

Typed or printed name of signee

FILED
JUL 27 AM 7:39
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA
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