## L15000128134

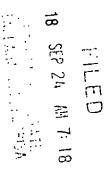
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| PICK-UP                 | ☐ WAIT             | MAIL      |
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| (Do                     | ocument Number)    |           |
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| Certified Copies        | _ Certificates     | of Status |
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| Special Instructions to | Filing Officer:    |           |
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## **COVER LETTER**

| TO:    | Registration Se<br>Division of Cor |  |   |   |
|--------|------------------------------------|--|---|---|
| 0115   |                                    | Majors Carpet And Tile Cle                   | aning LLC   |   |
| SUBJ   | JECT:                              | Name of Linu                                 | ited Liability Company  |   |
| The c  | melosed Articles of                | Amendment and fee(s) are sub                 | mitted for filing.  |   |
| Please | e return all correspo              | ndence concerning this matter                | to the following:   |   |
|        |                                    | Maurice Marshall                             |   |   |
|        |                                    | Marshalls Carpet And Tile                    | Name of Person<br>Cleaning LLC                                      |   |
|        |                                    | 109 Ambersweet Way, #40                      | Firm/Company<br>02 , Davenport                                      |   |
|        |                                    | Florida 33897                                | Address   |   |
|        |                                    | fcd.solutions@yahoo.com                      | City/State and Zip Code   |   |
|        |                                    | E-mail address: (                            | to be used for future annual report notifi                          | cation)   |
| For fi | urther information c               | oncerning this matter, please ca             | all;  |   |
| Maui   | rice Marshall                      | 41, 48                                       | 407 968 6198<br>at ()   |   |
|        | Name o                             | f Person                                     | Area Code Daytime   | Telephone Number  |
| Enelo  | osed is a check for th             | ne 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,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Marshall & Majors Carpet And Tile Cleaning LLC

| (Name of the Limited Lia  | bility Compa  | ny as it now appear<br>Liability Company) |   |
|---|---|---|---|
| (Ara  | mua i.mineu i   | главику Сопіралу)                         | - 6   |
| The Articles of Organization for this Limited Liability   | y Company   | were filed on Jul                         | y 27 / 2015 and and assigned  |
| Florida document number L15000128134  |   |   | PZI   |
| This amendment is submitted to amend the following:   |   |   | 10 量句   |
| A. If amending name, enter the new name of the l  | limited liab  | ility company he                          | re:   |
| Marshalls Carpet And Tile Cleaning LLC  |   |   | \$ \frac{1}{2} \tau_{\text{\tint{\text{\tin}\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}}\tint{\text{\text{\text{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}}}\tint{\text{\text{\text{\text{\text{\text{\text{\texi}}\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\texit{\texi}\text{\text{\texi}\text{\texi}\text{\texi}\text{\text{\text{\texi}\text{\texi}\text{\texitith}\tint{\tin}}\tint{\text{\tiin}\ |
| The new name must be distinguishable and contain the words  | Limited Liabi   | lity Company," the de                     | esignation "LLC" or the abbreviation "L.L.C."   |
| Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX) |   | 109 Ambersweet Way                        |   |
|   |   | # 402                                     |   |
|   |   | Davenport, Florida 33897                  |   |
|   |   | 109 Amber sweet Way<br>#402               |   |
|   |   | Davenport, FI                             | orida 33897   |
| B. If amending the registered agent and/or re<br>registered agent and/or the new registered office a<br>Name of New Registered Agent:   |   | <u>e</u> :                                | our records, enter the name of the  |
| 100   | Q Ambacu  | oot May #402                              |   |
| New Registered Office Address:  | 109 Ambersweet Way , #402  Enter Florida street address |   | ida street address  |
| Da  | venport   |   | Florida 33897   |
|   |   | City                                      | , Florida   |
|   |   | CW.                                       | Zip Code  |

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>      | Address              | Type of Action  |
|--------------|------------------|----------------------|-----------------|
| MGR          | Maurice Marshall | 420 Callawalk Court, |                 |
|              |                  |                      | ■ Add           |
|              |                  | Apartment 207        |                 |
|              |                  |                      | ☐ Remove        |
|              |                  | Davenport , FL 33896 |                 |
|              |                  |                      | Change          |
|              | Angela Marshall  | 420 Callawalk Court  |                 |
| AMBR         | <b>3</b>         |                      |                 |
|              |                  | Apartment 207        |                 |
|              |                  | , parament 20.       | <b>a</b> .      |
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| ive date, if other than the date of filing:  | (optional)  |
| fective date is listed, the date must be specific and cannot be prior to date of filing or many of the date inserted in this block does not meet the applicable statutory filing ment's effective date on the Department of State's records. | ore than 90 days after filing.) Pursuant to 605.0 |
| cord specifies a delayed effective date, but not an effective to 90th day after the record is filed.   | time, at 12:01 a.m. on the earlier                |
| September 19th 2018  |   |
|  |   |
|  |   |

Page 3 of 3

Filing Fee: \$25.00