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## COVER LETTER

TO: Registration Section Division of Corporations	rs.
SUBJECT: WFletcher Clean Name of Limited Lie	dua Service  ability Company
The enclosed Articles of Amendment and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
Winsome Fl	etcher
1) Fletcher	Name of Person  Cleaning Service  Firm/Company
P.O. Box 6	17203 Address
Orlando F	U 32861 State and Zip Code
wendy fletche	red for future annual report notification)
For further information concerning this matter, please call:	
Winsome Fletcher Name of Person	at (321) 246 - 4159 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\simeg\$ \$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 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

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

W Fletcher Cleaning Service
(Name of the Limited Liability Company & it now appears on our records.)  (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on September 9,2015 and assigned Plorida document number <u>15000153780</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:    Winsome Fletcher Cleaning Service; LC    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:
Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of the ne egistered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address
$ \underbrace{City}, Florida  \underbrace{City}  $
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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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Page 3 of 3

Filing Fee: \$25.00