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Certified Copies	Certificates	of Status
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SECRETARY OF STATE
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JAN 11 2016

S. YOUNG

COVER LETTER

TO: Registration Division of C						
	CLEANING PLUS, LLC.					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	oondence concerning this matter	to the following:				
	ANDREA FERREIRA					
	h	Name of Person		•		
	ASSURED ACCOUNTIN	IG AND TAX SERVICES			المسير	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·		en	
	3350 NW 22ND TER STE	EB-200			- NW	
		Address			ထ်	{
	POMPANO BEACH, FL	33069			1 184	Ţ
		City/State and Zip Code			12: 30	
	FRANCISANDAISHAB@			ş.	~~	
For further information	concerning this matter, please c	to be used for future annual report notif	ication)			
ANDREA FERREIRA	concerning this matter, preuse e	954 793-0353				
·	CD.	at ()	72.1.1	<u></u>		
Name	of Person	Area Code Daytime	Telephone Number	,		
Enclosed is a check for	the following amount:					
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status		
Regis Divis P.O. l	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ntions nter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ACTION CLEANING PLUS, LLC			
(Name of the Limi	ited Liability Comp: (A Florida Limited	any as it now appears on our records.) Liability Company)	
the Articles of Organization for this Limited I. Iorida document number L15000206418	iability Company	were filed on 12/10/2015	and assigned
his amendment is submitted to amend the following	lowing:		
. If amending name, enter the new name o	of the limited liab	oility company here:	
he new name must be distinguishable and contain the	1.61:	W. C. Maria C. Maria	1010 - 1010
-		205 NW 16TH ST.	e abbreviations L.L.C.
Enter new principal offices address, if applicable:		POMPANO BEACH, FL 33060	
<u>Principal office address MUST BE A STREI</u>	<u>ET ADDRESS)</u>	TOMITATIO DILACTI, 112 35000	₩ W W
nter new mailing address, if applicable:		1074 S. MILITARY TRAIL # 105	TEST DESCRIPTION
failing address MAY BE A POST OFFICE	BOX)	DEERFIELD BEACH, FL 33442	
If amending the registered agent and gistered agent and/or the new registered o Name of New Registered Agent:		<u>e</u> :	er the name of the
New Registered Office Address:	205 NW 16TH		
		Enter Florida street address	
	POMPANO B	, riorida	33060
		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>	Address	Type of Action
AMBR	Ruan B Ferreira de Araujo	150 SE 7th St. # 2	∧dd
		DEERFIELD BEACH, FL 33441	■ Remove
AMBR	SIMONE SANTOS SILVA	205 NW 16TH ST.	□ Change
		POMPANO BEACH, FL 33060	Add The Part of th
AMDD	ED ANGIG I DEDMEIO	205 NW 16TH ST.	CONTRACTOR
AMBR	FRANCIS L. BERMEJO	POMPANO BEACH, FL 33060	☐ Add
			■ Change
			Add
			☐ Remove
			Change
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PLEASE ADD FEIN: 81	<u> - 0844438</u>
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effective date, it other than the date of fining:	(optional) r to date of filing or more than 90 days after filing.) Pursuant to 605.020
te: If the date inserted in this block does not meet the applic nument's effective date on the Department of State's records	cable statutory filing requirements, this date will not be listed a s.
record specifies a delayed effective date, but no	ot an effective time, at 12:01 a.m. on the earlier
he 90th day after the record is filed.	
IANUADA STU	
ted JANUARY 5TH , 2016	·
Signature of a member or auth	
Many - Heneso	

Typed or printed name of signee