# L15000210640

(Re	questor's Name)	
- (Ad	ldress)	
(Ad	ldress)	***************************************
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETIVES OF STATE

K.S.ALY EXAMINER

## **COVER LETTER**

TO:	Registration Se Division of Cor			*
CITD I		NING SERVICES LLC		
SUBJ	ECI:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
		VASCO A CHU		
			Name of Person	<del></del>
		JCD CLEANING SERVIC	CES LLC	
		<del> </del>	Firm/Company	
P.O. BOX 4866				
		<del> </del>	Address	· ·
		WINTER PARK FL 32793	3	
		-	City/State and Zip Code	<del></del>
		CHUVACJ18@AOL.COM		
For fu	rther information c	e-mail address: (	to be used for future annual report notifi all:	canon
VAS	CO A CHU		407 749-2292 at ( )	
	Name o	f Person		Telephone Number
Enclo	sed is a check for th	ne following amount:		
<b>≡</b> \$2	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)
		ING ADDREGG	CONTRACTOR IN	- ADDDEGG

### 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**

2016 FILE	``
JAN 2	•*
PHIZ.	5/

JCD CLEANING SERVICES LLC

(Name of the Limited	Liabili	ty Company	<u>as it now ar</u>	pears on our re	cords.)
( <i>F</i>	Florida	a Limited Lia	bility Compa	iny)	

·	Liability Company)	SSEE FI ONLY	
The Articles of Organization for this Limited Liability Company lorida document number <u>L15000210640</u> .	were filed on 12/21/2015	and assigned	
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."	
inter new principal offices address, if applicable:	2275 N SEMORAN BLVD		
Principal office address MUST BE A STREET ADDRESS)	ORLANDO FL 32807		
		· <del>-</del> · · · · · · · · · · · · · · · · · · ·	
nter new mailing address, if applicable:	P.O. BOX 4866		
,	WINTER PARK FL 32793		
<u>Mailing address MAY BE A POST OFFICE BOX)</u>			
Mailing address MAY BE A POST OFFICE BOX)			
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered of		enter the name of th	
	ffice address on our records, g	enter the name of th	
. If amending the registered agent and/or registered or egistered agent and/or the new registered office address her	ffice address on our records, g	enter the name of th	
. If amending the registered agent and/or registered or gistered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, g	enter the name of th	
. If amending the registered agent and/or registered or egistered agent and/or the new registered office address her	ffice address on our records, g	enter the name of th	
8. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, ee:  Enter Florida street address	enter the name of the	

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 emending 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		FILED	
<u>Title</u>	<u>Name</u>	Address	2016 JAN 22 PM 12: 51	Type of Action
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	TALLAHASSEE, FLORIDY
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fective date, if other than the	date of filing:(optional)
n effective date is listed, the date mus ste: If the date inserted in this blo	t be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (sock does not meet the applicable statutory filing requirements, this date will not be listed as the
cument's effective date on the De	
record specifies a delayed	d effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after the rec	
IANTIA DAZ 10	2016
JANUARY 19 ted	, 2016
	James -

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00