L16000028165

(Re	equestor's Name)	
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(Cil	ty/State/Zip/Phone	e #)
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TO: Registration So Division of Con			
Milex Clea	-		
SUBJECT:	Name of Lim	ited Liability Company	<u>.</u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Michael Clay		
		Name of Person	
	Milex Cleaning, LLC		
		Firm/Company	
	1046 NW 10 Ave		
	, y, , , , , , , , , , , , , , , , , , 	Address	
	Fort Lauderdale, FL 33311		
		City/State and Zip Code	
	fortlauderdale.fl@maidpro.		·
For further information of	E-mail address: (concerning this matter, please of	to be used for future annual report notif all:	icauon)
Michael Clay		954 606-6311	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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, 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

Milex Cleaning, LLC					
(Name of the Limi	ted Liability Compan (A Florida Limited Li	y as it now appears on our re ability Company)	cords.		
The Articles of Organization for this Limited I	Liability Company v	were filed on Feb 9, 2016		_ and ass	signed
Florida document number L16000028165	·				
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liabil	lity company here:			
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the designation '	'LLC" or the abbre	viation "L	.L.C."
Enter new principal offices address, if applic	cable:				
(Principal office address MUST BE A STREI	ET ADDRESS)				
			<u> </u>	8	
Enter new mailing address, if applicable:		1046 NW 10 Ave		7.50 7.50 7.50 7.50 7.50 7.50 7.50 7.50	
(Mailing address MAY BE A POST OFFICE BOX)		Fort Lauderdale, FL 3331	l 😲 .	00	•
				PH	\$ #
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B. If amending the registered agent and registered agent and/or the new registered or			ords, <u>enter th</u>	e name	of the ne
Name of New Registered Agent:					
Hame of New Registered Figure.	1046 NW 10 A-				
New Registered Office Address:	1046 NW 10 Av	Enter Florida street a	ddress		
	Fort Lauderdale		, Florida <u>33311</u>		
		City	_, . 1011 u #	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>	Type of Action
AMBR	Michael Clay	1046 NW 10 Ave	
		Fort Lauderdale, FL 33311	☐ Remove
			■ Change
AMBR	Francisco Pulido	1046 NW 10 Ave	□ Add
		Fort Lauderdale, FL 33311	□ Remove
MGR	Alexandra Castillo	1046 NW 10 Ave	Add
		Fort Lauderdale, FL 33311	Remove
			Change
			□ Rethove
		 	□ Change
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Tective date, if other than the an effective date is listed, the date mu	date of filing:	o data of filing or more tha	(optional)	Purguant to 605
ote: If the date inserted in this b	lock does not meet the applical	ble statutory filing requ	irements, this date w	ill not be liste
ocument's effective date on the D	repartment of State's records.			
e record specifies a delaye	d effective date, but not	an effective time,	at 12:01 a.m. or	n the earlie
The 90th day after the red				
March 24	2016			
	 , 	 •		
ated				
hhart	Signature of a member or author			

Page 3 of 3

Filing Fee: \$25.00