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(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificate:	s of Status
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Special Instructions to	Filing Officer:	
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J. HARRIS

COVER LETTER

Div	ision of Corp	orations		
SUBJECT:	Versatile Cle	aning LLC		
o o o o o o o o o o o o o o o o o o o	,	Name of Limit	ed Liability Company	·
The enclosed	d Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspon	dence concerning this matter to	o the following:	
		Emilie Clark		
			Name of Person	
	Name of Limited Liability Company Plosed Articles of Amendment and fee(s) are submitted for filing. Perturn all correspondence concerning this matter to the following: Emilie Clark			
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
	12936 Violino lane (apt 304)			
		Naples, FL 34105		
			City/State and Zip Code	
		E-mail address: (to	be used for future annual report	notification)
For further i	nformation co	ncerning this matter, please cal	II:	
Emilie Clarl	ζ			7
	Name of	Person	Area Code Day	time Telephone Number
Enclosed is	a check for the	e following amount:		
□ \$25.00 I	Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

TO:

Registration Section

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

any as it now appears on our records. Liability Company))
y were filed on March 7th, 2016	and assigned
bility company here:	
ility Company," the designation "LLC"	or the abbreviation "L.L.C."
	3; 6; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1;
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	PH Cos
	
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office address on our records,	enter the name of the ne
Enter Florida street address	
with the state of	••
, Flor	ida Zip Code
	oility company here: ility Company," the designation "LLC", ffice address on our records, e: Enter Florida street address , Flor

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
Vice Pres	Shelly Huth	1812 52nd Terrace SW	
		Naples, FL 34116	Remove
			Change
			□ Add
			□ Remove
			Change
			□ Add
			Remove
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			☐ Remove
			☐ Change

D. If amending	any other info			ttach additional she		
	Emilia	·Clauh	Sole	Owner	/ president	ard
	Emilia Registe	ed as	ent.	Owner	/ (
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(If an effective of Note: If the	late is listed, the dat date inserted in th	a the date of filing e must be specific and his block does not m he Department of S	cannot be prior to da neet the applicable	te of filing or more than statutory filing requir	(optional) 90 days after filing.) Pursua ements, this date will no	unt to 605.0207 (3) t be listed as the
		ayed effective d record is filed.	ate, but not an	effective time, a	t 12:01 a.m. on the	e earlier of:
Dated Septem	mber 9th		2016			ಕ
<i></i>		,	•			001
_		Signature of a r	nember or authorized	representative of a me	mber	
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E	milie Clark					PHI2
			Typed or printed nar	ne of signee		

Page 3 of 3

Filing Fee: \$25.00