

L16 000 078636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

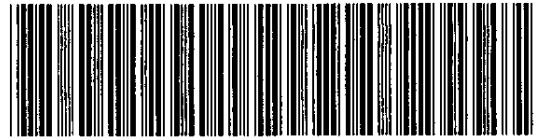
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01/16/2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2016

KLEEN 2 PERFECCTION LLC
315 SOMBRERO BEACH RD
MARATHON, FL 33050

SUBJECT: KLEEN 2 PERFECTION LLC
Ref. Number: L16000078636

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2016 AUG -9 PM 4:10
TALLAHASSEE, FLORIDA

We have received your document for KLEEN 2 PERFECTION LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 916A00014612

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KLEEN 2 PERFECTION LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA S GARCIA

Name of Person

KLEEN 2 PERFECTION LLC

Firm/Company

315 SOMBRERO BEACH RD

Address

MARATHON, FL 33050

City/State and Zip Code

LUSTMISSY9494@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MARIA S GARCIA

305 481-8357
at ()

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)

☐ \$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**

KLEEN 2 PERFECTION LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/21/2016 and assigned
Florida document number L16000078636

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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:

315 Sombrero Beach RD

(Principal office address MUST BE A STREET ADDRESS)

Marathon, FL 33050

Enter new mailing address, if applicable:

315 Sombrero Beach RD

(Mailing address MAY BE A POST OFFICE BOX)

Marathon, FL 33050

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Maria S Garcia

New Registered Office Address:

315 Sombrero Beach RD

Enter Florida street address

Marathon

Florida 33050

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.

M Garcia
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>	<u>Type of Action</u>
MGR	Maria S Garcia	315 Sombrero Beach RD	<input type="checkbox"/> Add
		Marathon, FL 33050	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Greg Pauser	462 30th St Ocean	<input type="checkbox"/> Add
		Marathon, FL 33050	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

PLEASE REMOVE GREG PAUSER AS AN
AUTHORIZED MEMBER of this LLC.
Kleen 2 Perfection

I send a check for \$55.00 check NO. 1011
on July 2, 2016

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 4/2/2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated

7/2/16

M Garcia

Signature of a member or authorized representative of a member

Maria S Garcia

Typed or printed name of signee