

11/19/2016

Division of Corporations

L16000083394

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : V & A BUSINESS SOLUTION INC
Account Number : I20160000021
Phone : (954)865-6607
Fax Number : (754)205-5680

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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17 JAN -4 AM 8:56

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2017 JAN -4 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
WE CLEAN MOBILE SPA LLC**

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Corporate Filing Menu

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JAN 05 2017
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WE CLEAN MOBILE SPA 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:

JUAN C LOPEZ

Name of Person

MGR

Firm/Company

4279 NW 89TH AVE APT 103

Address

CORAL SPRINGS FL 33065

City/State and Zip Code

v.a.businessolutions@gmail.com

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

For further information concerning this matter, please call:

JUAN C LOPEZ

Name of Person

at (954) 857-3916

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

Jan 04 17:09:11a
850-617-6381

V & A Business Solutions

12/20/2016 9:34:03 AM PAGE

(754)205-6680

p.1

1/001 Fax Server



December 20, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

WE CLEAN MOBILE SPA LLC
2878 CARAMBOLA CIRCLES S
COCONUT CREEK, FL 33066

SUBJECT: WE CLEAN MOBILE SPA LLC
REF: L16000083394

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

MISSING PAGE 2 OF AMENDMENT FORM

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.

Stacey M Warren
Regulatory Specialist II

FAX Aud. #: H16000286048
Letter Number: 216A00026938

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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FILED
JAN 17 2017
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WE CLEAN MOBILE SPA 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 04/27/2016 and assigned
Florida document number L16000083394

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:

4279 NW 89TH AVE APT 105

(Principal office address MUST BE A STREET ADDRESS)

CORAL SPRINGS FL 33065

Enter new mailing address, if applicable:

4279 NW 89TH AVE APT 105

(Mailing address MAY BE A POST OFFICE BOX)

CORAL SPRINGS FL 33065

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:

JUAN C LOPEZ

New Registered Office Address:

4279 NW 89TH AVE APT 105

Enter Florida street address

CORAL SPRINGS

Florida 33065

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.

Juan C Lopez
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	DIEGO G ARANGO	2878 CARAMBOLA CIRLCES S	<input type="checkbox"/> Add
		COCONUT CREEK FL, 33066	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	REYNALYN BENVENUTTI	4279 NW 89 AVE APT 105	<input checked="" type="checkbox"/> Add
		CORAL SPRINGS FL, 33065	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

E. Effective date, if other than the date of filing: 11/19/2016 (optional)

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.

(b) The 90th day after the record is filed.

Dated NOVEMBER 19 2016

Signature of a member or authorized representative of a member

JUAN C LOPEZ

Typed or printed name of signee

17 JAN -4 4:11 8:56