

L16000117214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

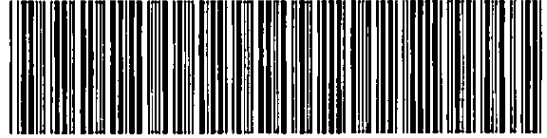
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700394802757

09/26/22--01030--01E **90.00


S. CHATHAM
DEC 20 2022

FILED
STATE OF GEORGIA
DIVISION OF CORPORATIONS
22 SEP 26 PM 10:39

17 SEPTEMBER 2022

GOOD MORNING MY NAME IS YOLANDA FERMAINTT. I AM AVAILABLE TO RECEIVE CALLS FROM
9:00 AM TO 6:00 PM ANY DAY OF THE WEEK. MY CELL PHONE NUMBER IS 407-590-6657. MY
ADDRESS IS
523 S. Monroe St.
Beverly Hills FL 34465

thanks for your attention att. YOLANDA FERMAINTT

A handwritten signature in black ink, appearing to read 'Yolanda Fermaintt', written in a cursive style. The signature is positioned to the right of the typed name 'YOLANDA FERMAINTT'.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

JESTER CLEANING SERVICES 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 FLORIDA and assigned Florida document number L16000117214.

This amendment is submitted to amend the following:

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

FIVE STAR COMMERCIAL CLEANING LLC

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:

523 S MONROE st.

(Principal office address MUST BE A STREET ADDRESS)

BEVERLY HILLS

FLORIDA 34465

Enter new mailing address, if applicable:

523 S. MONROE st.

(Mailing address MAY BE A POST OFFICE BOX)

BEVERLY HILLS

FLORIDA 34465

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: _____

New Registered Office Address: _____

Enter Florida street address

Florida

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.

If Changing Registered Agent, Signature of New Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 SEP 20 PM 10:39

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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

SEP 2 11 11 AM '09
PHOTO COPY
ST. LOUIS PUBLIC LIBRARY
DIVISION OF COMMUNICATIONS

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

Multiple horizontal lines for amending information.

FILED
DIVISION OF CORPORATIONS
22 SEP 26 PM 10 39

E. Effective date, if other than the date of filing: 22 SEPTEMBER 2022 (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 17 SEPTEMBER 2022

Yolanda FermainTT
Signature of a member or authorized representative of a member

YOLANDA FERMAINTT

Typed or printed name of signee