

116000139480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

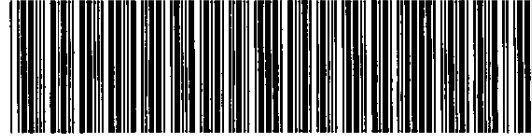
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2016 SEP 19 A 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SEP 19 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2016

ERIC SWENSON
6108 MIRAMAR PKWY
MIRAMAR, FL 33023

SUBJECT: INFINITY PROFESSIONAL CLEANING SERVICES LLC.
Ref. Number: L16000139480

We have received your document for INFINITY PROFESSIONAL CLEANING SERVICES LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Mr. MS [unclear] takes

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.

Octavia I Simmons
Regulatory Specialist II

Letter Number: 216A00018882

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Infinity Professional Cleaning
Name of Limited Liability Company Services, LLC

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

Please return all correspondence concerning this matter to the following:

Eric Swenson, Managing Director
Name of Person

Infinity Professional Cleaning Services, LLC
Firm/Company

6108 Miramar Pkwy
Address

Miramar, FL 33023
City/State and Zip Code

infinitycleaningsvcs@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Swenson, Mgr. Dir. at 954 614-7040
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Infinity Professional 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 7-25-16 and assigned
Florida document number L16000139480

This amendment is submitted to amend the following:

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

NA

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:

(Principal office address MUST BE A STREET ADDRESS)

NA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NA

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:

NA

New Registered Office Address:

NA

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.

NA
If Changing Registered Agent, Signature of New Registered Agent

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MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Type of Action

☐ Add☒ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

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SECRETARY OF STATE
FLORIDA

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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.

Dated 9/15, 2016

Signature of a member or authorized representative of a member

Managing Director

Typed or printed name of signer

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2009 SEP 16 A 11:36
CLERK OF STATE
TALLAHASSEE, FLORIDA