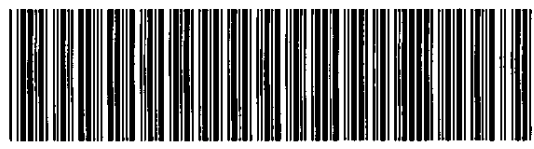


L17000008870



100298812721

05/09/17--01006--015 \*\*25.00

(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:

RECEIVED  
2017 MAY -8 AM 10:12  
TALLAHASSEE FLORIDA

Office Use Only

RECEIVED  
17 MAY -8 PM 2:53

O SIMMONS  
MAY 09 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 24/7 SUPERIOR CLEANING & RESTORATION 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:

DIANE BURNS

Name of Person

24/7 SUPERIOR CLEANING & RESTORATION LLC

Firm/Company

228 HIBISCUS ST., #5

Address

JUPITER, FL 33458-3523

City/State and Zip Code

DBURNS4901@AOL.COM

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

For further information concerning this matter, please call:

DIANE BURNS

561 793-8536  
at ( )  
Area Code Daytime Telephone Number

Name of Person

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**

24/7 SUPERIOR CLEANING & RESTORATION 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 JANUARY 11, 2017 and assigned Florida document number L17000008870.

This amendment is submitted to amend the following:

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

N/A

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:**

228 HIBISCUS ST., #5

**(Principal office address MUST BE A STREET ADDRESS)**

JUPITER, FL 33458-3523

**Enter new mailing address, if applicable:**

228 HIBISCUS ST., #5

**(Mailing address MAY BE A POST OFFICE BOX)**

JUPITER, FL 33458-3523

**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:

DIANE BURNS

New Registered Office Address:

11419 ORANGE GROVE BLVD

*Enter Florida street address*

WEST PALM BEACH

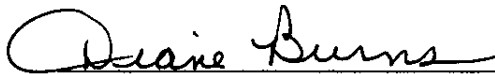
*City*

Florida 33411

*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**

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>
AMBR	ANTHONY R. GONZALES	228 HIBISCUS ST., #5	<input checked="" type="checkbox"/> Add
		JUPITER, FL 33458-3523	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JACQUELYN PETTENGILL	228 HIBISCUS ST.,#5	<input checked="" type="checkbox"/> Add
		JUPITER, FL 33458-3523	<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

17  
MAY  
-8  
M  
2  
3

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

N/A

Multiple horizontal lines for text entry. A vertical stamp on the right side of the lines reads "17 MAY - 8 PM 2:53".

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (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 MAY 4, 2017



Signature of a member or authorized representative of a member

DIANE BURNS

Typed or printed name of signee