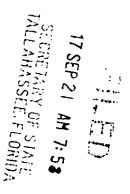
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PICK-UP WAIT	MAIL
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Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Mission Accou	mplished Cleaning Services LLC
N	amb of Limited Liability Company
The enclosed Articles of Amendment and fee	(s) are submitted for filing.
Please return all correspondence concerning t	bis matter to the following:
La	Name of Person
Mission	Accomplished Cleaning Services LLC
140 Co.	Address  nford FL 32771  City/State and Zip Code  Kesyba Ogmail. Com  address://to be used for future annual report notification)
Sa	in ford FL 32771
<u>  aara</u> E-mai	Kesyba Ogmail. Com address: (to be used for future annual report notification)
For further information concerning this matter	
Laara Kuyba	at (
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee Certificate of	
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

The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ Florida document number L170000 IIL 90 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:

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

Page 1 of 3

If amending A or removed fre	uthorized Person(s) authoriom our records:	ized to man:	age, enter the title, name, and address of each p	erson being added
MGR = Man AMBR = Auti	ager horized Member			
Title	Name		Address	Type of Action
MGR	Laara Kesy	ba	Sanford, FL 32771	🗆 Add
			Sanford, FL 32771	_ Remove
	ĺ			Change
MGR	Rob Kesyba	<u>.</u>	401 E. 1st. St.	_ Add
	į		#1534	_□ Remove
	 		Sanford, FL 32772-1534	_D Change
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D. If a	mending any other	   information, enter 	change(s) here: (Att	ach additional she	ets. if necessary.)			
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		dal-wad affect	ive date, but not a	n effective time	, at 12:01 a.m.	on the e	arlier of:	
If th	ne record specifie The 90th day af	is a delayed effect fter the record is f	iled.					
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