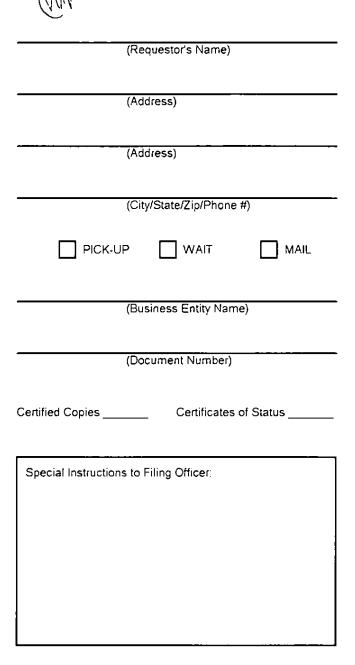
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Office Use Only



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## . COVER LETTER

Division of Corporations	
SUBJECT: King Quality Services 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:	•
Christ 6 David Name of Person	e 3:.
King Quality Services LLC	
14332 State Highway 20	
Miceville, Florida, 32518  City/State and Zip Coch:	
David Chris 802 @ yatoo - Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Christ 6 David at (850) 812 - 1596 Name of Person Area Code Daytime Telephone Number	<del></del>
,	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified C	of Status &
Mailing Address:       Street Address:         Registration Section       Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**Registration Section** 

TO:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

King Busines Comices 110

1/ INA COUNTY OF	UILLS CAC
me of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company	were filed on ON ON and assigned
Florida document number <u>L170000313</u>	were filed on O210812011 and assignment 3 4
Asis amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Blue Sky Cleaning Ser	vices LLC
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:	771 Rockport Court
(Principal office address MUST BE A STREET ADDRESS)	Fort waiton Beach, 32548
	Apartment #3
	·
Enter new mailing address, if applicable:	771 Rockport Court Fort
(Mailing address MAY BE A POST OFFICE BOX)	watton Beach, Florida, 32548
	watton Beach, Florida, 32548 Apartment #3
D. If any disc the maintain description of the maintain description of the second seco	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: Chri	St 6 David
New Registered Office Address: 711	2 OCKPORT COURT FOR THE BON
	Entar Elavida etwat addrese

## 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 me 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>	Type of Action
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effective	date is listed, date inserte	the date mu	ast be speci	itic and cann	ot be pri	or to date o	u filing or	more than	90 days ait	er filing.) l	
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