# L17000051901

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# **'COVER LETTER**

TO: Registration Section  Division of Corporations
SUBJECT: Fantastic Spot Cleaning SVS 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:
Maria Rojas Name of Person
Fantastic Spot Cleaning SVC LLC
255 Bonnie Blud Apt 211
Palm Springs FL 33461 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Maria R Rojas at (561) 319-3638  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status 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

(Name of the Limited Liability Con (A Florida Limited)	npany as it now appears on our records.) red Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L1700005 190</u> /	any were filed on $03/06/17$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited I	iability company here:
The new name must be distinguishable and contain the words "Limited L	
Enter new principal offices address, if applicable:	Maria R Rojas
(Principal office address MUST BE A STREET ADDRESS)	2657
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	Palm Springs FL 33461
B. If amending the registered agent and/or registered registered agent and/or the new registered office address because the second of the new registered of the second of the new registered of the second of the se	office address on our records, enter the name of the ne
Name of New Registered Agent: Maria	a Cr Mata
New Registered Office Address: 31 64	1 Melalewa DR Enter Florida street address
West	Palm Beach, Florida 33406  City Zip Code
Now Designation Assetts Cinciples 16 should be to the 14	4

## 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

IGR = M $AMBR = A$	anager uthorized Member		
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Filing Fee: \$25.00