# 170006194

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N. CAUSSEAUX

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# COVER LETTER

TO:	Registration So Division of Con			· g	ge d
SUBJE		ection & Cleaning, LLC			
SUBJE	CI;	Name of Limited I	Liability Company .		
The enc	losed Articles of	Amendment and fee(s) are submitte	ed for filing.		
Please r	eturn all correspo	ondence concerning this matter to th	e following:		
		Maria R Percz			
			Name of Person		
•		LB Construction & Cleaning, L	LC		
			Firm/Company		
		1018 Gerald Ave			
			Address		
		Lehigh Acres, FL 33936			
			ty/State and Zip Code		
		delrosario76@hotmail.com	10.0.	· · · · · · · · · · · · · · · · · · ·	
For furtl	ner information c	oncerning this matter, please call:	used for future annual report notifi	cation)	
MAria I			239 651-7496 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclose	d is a check for th	ne following amount:			
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	1 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of State Certified Copy (additional copy is enc	

### 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

LB Construction & Cleaning, 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 3-15-2017 and assigned Florida document number L17000061941 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LB Construction Cleaning, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: 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.

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** □ Add \_ Change ☐ Add □ Remove ☐ Change \_□ Add \_□ Remove □ Add ☐ Remove ☐ Change □ Add ☐ Remove

\_□ Change

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If an ef Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
	3/24(17
Dated	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00