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S. WARREN JUN 1 2 2017

COVER LETTER

TO: Registration Se Division of Cor	ction ' ' porations		
subject: <u>Fas</u> f	Shine Cleaning Name of Lim	Services LLC	
	Name of Emil	ned Diability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Gabriel G	Name of Person	
	Fast Shine	Name of Person Cleaning Services Firm/Company	.
		15 th St Address	
	Miami, Fl	City/State and Zip Code Cia 23 @ yahoo.com to be used for future annual report notific	
	E-mail address:	to be used for future annual report notific	cation)
For further information of	oncerning this matter, please ca		
Gabriel Name of	Carcia	at (<u>915</u>) <u>261 - 0</u> Area Code Daytime	7157 Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	_	□ \$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 , ARTICLES OF ORGANIZATION **OF**

Name of the Limited Liability Co (A Florida Lin	ompany as it now appears or	ı our records.)	
(A riorida Lim	inted Liability Company)		
The Articles of Organization for this Limited Liability Comp	pany were filed on <u>M</u>	y 30, 2017 and assigned	
Florida document number <u>L 7000 81 92</u> .		1 '	
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 desig	nation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES:	<u>s)</u>		
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ir records, enter the name of the n	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida Zip Code	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</u>		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp			

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, If this decument 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>	Address	Type of Action
MGR	Angel A. Perez		Add
		9620 - 711 1	Remove
		8920 SW 5TH Lane Miami, FL 33174	<u></u> ✓ Change
MGR	Cabriel Garcia	8920 SW 5 TH lane Miami, IPL 33174	
			□ Remove
			☐ Change
			Add
			☐ Remove
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			Add
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Filing Fee: \$25.00