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# **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:	CLEANING	S SOLUTIONS AVENTURA,	LLC	
SUBJECT.		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		ANGEL GONZALEZ		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		CLEANING SOLUTIONS	S AVENTURA, LLC	
		***************************************	Firm/Company	
		1646 NE 151 STREET		
			Address	
		MIAMI, FL 33162		
			City/State and Zip Code	<del></del>
		ANGELRGONZALEZS30(		
		E-mail address: (	to be used for future annual report notif	ication)
For further in	nformation co	oncerning this matter, please ca	all:	
ANGEL GO	NZALEZ		786 817-1244 at ( )	
	Name of	Person		Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$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:

TO:

**Registration Section** 

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

CLEANING SOLUTIONS AVENTURA	A, LLC	
( <u>Name of the Limited Lie</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liability	ty Company were filed on 06/05/2017	and assigned
Florida document number	·	
This amendment is submitted to amend the following	g:	
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	ne abbregation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	Si Ja T
<u>(Principal office address MUST BE A STREET AL</u>	ODRESS)	9 5 7
		PH 5: 51
Enter new mailing address, if applicable:		<u></u>
(Mailing address MAY BE A POST OFFICE BOX	2	<i>t</i>
B. If amending the registered agent and/or registered agent and/or the new registered office a		ter the name of the nev
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>	Name	<u>Address</u>	Type of Action
MGR	ANGEL GONZALEZ	1646 NE 151 STREET	
		MIAMI, FL 33162	Remove
			Change
MGR	DEYLIN RAMIREZ	1646 NE 151 STREET	■ Add
		MIAMI, FL 33162	□ Remove
			Olysis Change  Change  Change  Change  Change
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Effective date, if other than th	06/05/2017	(optional)
f an effective date is listed, the date me	st be specific and cannot be prior to date of filing or more lock does not meet the applicable statutory filing r	than 90 days after filing.) Pursuant to 605.0207 (3)
ne record specifies a delaye The 90th day after the re	d effective date, but not an effective time tord is filed.	ne, at 12:01 a.m. on the earlier of:
Dated	2017	
AG	Signature of a member of authorized representative of	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00