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COVER LETTER

	gistration Sec ision of Corp		•	*			
CUBICCT	JenDee Ente						
SUBJECT:		Name of Limi	ted Liability Company				
The enclosed	I Articles of a	Amendment and fee(s) are subt	nitted for filing.				
Please return	all correspon	ndence concerning this matter t	to the following:				
		Barbara McKeever					
		JenDee Enterprises	Name of Person				
		406 Wartinbee Lane	Firm/Company				
		The Villages, Florida 3216.	Address				
		City/State and Zip Code info@surecleansolutions.com					
		E-mail address: (t	o be used for future annual re	eport notification)			
For further in	nformation co	oncerning this matter, please ca	ill:				
Barbara Mel	Keever		352 633-	-5387			
	Name of	Person	Area Code	Daytime Teleph	one Number		
Enclosed is	a check for th	e following amount:					
■ \$25.00 F	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		1 \$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

JenDee Enterprises LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000122176</u> .	were filed on 06/05/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SureClean Business Enterprises LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.C."
Enter new principal offices address, if applicable:	406 Wartinbee Lane	The state of the s
(Principal office address MUST BE A STREET ADDRESS)	The Villages, FL 32163	3: H H
Enter new mailing address, if applicable:		25 B
(Mailing address MAY BE A POST OFFICE BOX)		·
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flor	rida
	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>	Address	Type of Action
			
			Remove
		406 Wartinbee Lane, The Villages, FL 32163	
Pres	Barbara Ann McKeever		□ Add
			□ Remove
			☐ Change
		·	□ Remove
			Dethange
			Remove
			Change
			□ Remove
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Effective date, il If an effective date is	s listed, the date mus	st be specific and	l cannot be pric	or to date of filin	g or more than 90	(option) days after fil	ing.) Purst	ant to 60	5.0207 (3
Note: If the date document's effect	inserted in this bl	ock does not n	nect the appli	cable statutor;	y filing require	nents, this d	ate will n	ot be lis	ted as th
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he record spec The 90th da	ifies a delayed y after the rec	l effective d ord is filed.	late, but n	ot an effect	tive time, at	12:01 a.r	m. on th	ne earli	ier of:
October 10)		2019						
Dateu		 ,	·	/					

Typed or printed name of signee