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(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Pristine Cleaning SVS	of Florida LLC
	of Limited Liability Company)
The enclosed member, resignation or di	issociation and fee(s) are submitted for filing.
Please return all correspondence concer	rning this matter to:
Jeanette Rutland	
(Contact Person)	
Pristine Cleaning SVS of Florida LL	С
(Firm/Company)	
15628 Aurora Lake Circle	
(Address)	
Wimauma, FL. 33598	
(City/State and Zip Code)	
For further information concerning this	
JEANETTE RUTLAND	at (154) (051-1872/ (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made pay. S25 Filing Fee	able to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
izi riaioni or corporationa	Division of Conjunctions

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Pristine Cleaning SVS of Florida LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan	and assigned	
Florida document number L17000186365		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the ab	breviation "L.IC"
Enter new principal offices address, if applicable:		SECTIVISION SECTION SE
Principal office address MUST BE A STREET ADDRESS)		
		2 유존
		P 2000
Enter new mailing address, if applicable:		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Mailing address MAY BE A POST OFFICE BOX)		10 x
3. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		the name of the no
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code

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
MGR	Dulie Maria Abasolo	611 Winterside Drive	□ Add
		Apollo Beach, FL. 33572	■ Remove
			□ Change
MGR	Lillibets Luna	15628 Aurora Lake Circle	<u></u>
		Wimauma, FL. 33598	Remove
			Change
MGR	Jeanette Rutland	15628 Aurora Lake Circle	
		Wimauma, FL. 33598	Remove
		-	
			Remove
			Change
			Add
			Remove
			Change
			
			☐ Remove
			□ Change

			—

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		<u>.</u>	
			3 ×
		0/20/2019	
an effectiv	date, if other than the date of filing the date is listed, the date must be specific an	id cannot be prior to date of filing or more than 90 days after filing.) Pursuant to	605.0207
ote: ir t ocument	s effective date on the Department of 3	meet the applicable statutory filing requirements, this date will not be State's records.	nsted as
			D
	I specifies a delayed effective th day after the record is filed	date, but not an effective time, at $12\!:\!01$ a.m. on the ea.	arlier o
	August 20	2018	
ated			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as	it appears on the records of the Florida Department
of State is: Prist	ine Cleaning SVS of Flori	da LLC
2. The Florida docs L1700018636	-	ssigned to this limited liability company is:
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is:
4. I, Dulcie Maria	Abasolo	, hereby withdraw/resign as a
Manager	,	
	(Print Title)	
resignation in wr	, , , ,	ning Manager
_	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	