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(Address)	100304021261			
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(City/State/Zip/Phone #)				
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	ELIABLE I	LAWN CARE, RESIDENTIA	AL AND CLEANING SERVICES	SLLC
SUBJECT: _		Name of Limi	ted Liability Company	······································
The enclosed A	articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return al	I correspond	dence concerning this matter	to the following:	
		Jacqueline Woodson		
		······································	Name of Person	* - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
		Woodson Corporation		
			Firm/Company	···
		108 Totten Street		
			Address	
		Fort Leonard Wood, MO 6.	5473	
		jacky565@icloud.com	City/State and Zip Code	 -
		•	o be used for future annual report no	tification)
For further info	rmation con	cerning this matter, please ca	d1:	•
Jacqueline Woo	odson		573 855-3434	
	Name of F	Person		ne Telephone Number
Enclosed is a ch	heck for the	following amount:		
□ \$25.00 Filii	ng 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: 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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on September 25, 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:	
RELIABLE CLEANING SERVICES AND LAWN CARE "LLC"		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	9704 North Palafox Highway	
(Principal office address MUST BE A STREET ADDRESS)	Pensacola, FL 32534	
Enter new mailing address, if applicable:	108 Totten Street	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	Fort Leonard Wood MO 65473	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the n
Name of New Registered Agent:	,	355 1
New Registered Office Address:		(n) (a)
	Enter Florida street address Florida	
	, Florida	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 **Type of Action** Title <u>Name</u> **Address** _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change Remove ☐ Change □ Remove ☐ Change _□ Add □ Remove _□ Change _ 🗆 Add _□ Remove

_□ Change

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fective date, if other than the dann effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	te of filing: specific and cannot be p does not meet the ap	olicable statutory	filing requirements	s, this date will not be listed
record specifies a delayed et The 90th day after the record		not an effect	ive time, at 12:	01 a.m. on the earlie
September 26	2017			
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Filing Fee: \$25.00