117000005742

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(61,761612,51,11616,7)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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TALLAHASSEE FLORIDA

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COVER LETTER

	gistration Secti rision of Corpo					
SUBJECT:	Eco Touch Cleaning Services, LLC					
SOBJECT.		Name of Limit	ed Liability Company			
The enclosed	d Articles of An	nendment and fee(s) are subm	nitted for filing.			
Please return	all correspond	ence concerning this matter to	o the following:			
		Gerard Suico				
		·	Name of Person			
		Eco Touch Cleaning Service	es			
			Firm/Company			
		14769 Enclave Lakes Dr C3	3			
			Address			
		Delray Beach, FL 33484				
			City/State and Zip Code			
		leighsuico@yahoo.com				
		E-mail address: (to	be used for future annual repo	t notification)		
For further i	nformation con-	cerning this matter, please cal	II:			
Gerard Suic	υ		561 360-97	79		
	Name of Po	erson	Area Code D	aytime Telephone Number		
Enclosed is	a check for the	following amount:				
■ \$25.00 E	Filing 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

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

Eco Touch Cleaning Services, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 10/4/2017 and assigned Florida document number L17000205742 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 designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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	Address	Type of Action
MGR	Gerard Suico	14769 Enclave Lakes Dr C3	≅ Add
		Delray Beach, FL 33484	☐ Remove
			☐ Change
		 	☐ Add
		 	Remove
			☐ Change
		 	☐ Add
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ffective date, if other than the date of filing:an effective date is listed, the date must be specific and cannot be prior to	(optional)	
an effective date is listed, the date must be specific and cannot be prior to other. If the date inserted in this block does not meet the applicable	date of filing or more than 90 days after filing.) P le statutory filing requirements, this date wi	ursuant to 605.020 ill not be listed a
ocument's effective date on the Department of State's records.		
e record specifies a delayed effective date, but not a	an effective time, at 12:01 a.m. or	the earlier c
The 90th day after the record is filed.		
O k 11		
ated October 11 , 2017		
	/	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00