117000210827

(Red	questor's Name)	
(Add	lress)	
(Add	dress)	
(City	//State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	_
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



800305903378

11/28/17--01031--006 **25.00

ALL ABACS AT LECTOR

2017 ROP 27 AM III: 30

2017 NOV 27 PN 3: 2 SLCRETARY OF STATE ALL AHASSEF, FLORII

1NOV 27 PM 3:

K. SALY NOV 3 0 2017

COVER LETTER

то:	Registration Sec Division of Corp			
		URE CLEANING, LLC.		
SUBJE	CT:	Name of Lim	ited Liability Company	
The en	closed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		GREG MCHENRY		
		·	Name of Person	
		GM PRESSURE CLEAN	NG, LLC.	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		13 RIPLEY WAY		
			Address	
		BOYNTON BEACH, FL	33426	
			City/State and Zip Code	<u> </u>
		MCHENRY192@GMAIL.		
		E-mail address: (to be used for future annual report notifi	cation)
For fur	ther information co	oncerning this matter, please co	all:	
GREG	MCHENRY		561 676-6380	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
\$2	5.00 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section

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 Lial (A Flor	hility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L17000210827	Company were filed on OCTOBER 11, 2017	and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		the name of the new
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

GM PRESSURE CLEANING, LLC.

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
AMBR	ROXANNA MCHENRY	13 RIPLEY WAY	■ Add
		BOYNTON BEACH, FL 33426	C Remove
			Change
			🖸 Add
			☐ Remove
			TILL TILL
			ALLA ROY 27 TO THE SSEED OF RETRIEVED TO THE SSEED OF RETRIEVED TO THE SECOND TO THE S
			CREMOVE 3: 23
			🗆 Add
			☐ Remove
			Change
			🗆 Add
			□ Remove
			Change
<u></u> -		<u></u>	
			□ Remove
			Change

		······································		
-				
				- (C. 1)
			,,	MINU 2
				55 of 3
				X 5. 72.
				
		<u> </u>		
		··-		
ffective date, if other than the date of an effective date is listed, the date must be spe-	of filing:		(optiona))
an effective date is listed, the date must be spe- lote: If the date inserted in this block doe	eific and cannot be prior	to date of filing or more able statutory filing	e than 90 days after filir	g.) Pursuant to 605.0207 (3)
ocument's effective date on the Departme	ent of State's records		•	
				11
e record specifies a delayed effec The 90th day after the record is		ot an effective tin	ne, at 12:01 a.m	, on the earlier of:
NOVEMBER 16	2017	\triangleleft		
	/	orized representative o		·

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee