

U7000211239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

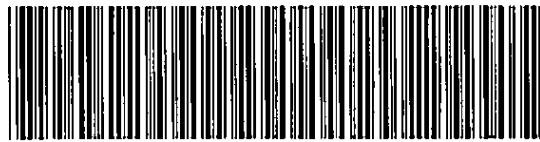
(Business Entity Name)

(Document Number)

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10/3/18 9:24:16 AM  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 18, 2018

YESENIA M VARGAS  
730 HIBISCUS AVE  
LAKE WALES, FL 33853

SUBJECT: JR CLEAN TEAM,LLC  
Ref. Number: L17000211239

We have received your document for JR CLEAN TEAM,LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 618A00021356

FILED  
10/19/2018  
FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CC: [REDACTED]  
10/19/2018  
Division of Corporations

# COVER LETTER

## Registration Section Division of Corporations

ECT: \_\_\_\_\_  
Name of Limited Liability Company

Enclosed Articles of Amendment and fee(s) are submitted for filing.

Return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

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FLORIDA  
DEPARTMENT  
OF STATE  
AGENCY  
REGISTRATION  
AND  
CORPORATIONS  
DIVISION  
TALLAHASSEE, FL

sed is a check for the following amount:

\$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  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF  
*TR Clean Team, LLC*

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on Oct 12, 2017 and assigned a document number 408 C17000211239

amendment is submitted to amend the following:

amending name, enter the new name of the limited liability company here:

The name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

or new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_

or new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_

If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_

*City*

*Zip Code*

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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

**Indicating Authorized Person(s) authorized to manage, enter the title, name, and address of each person being admitted from our records:**

$\zeta$  = Manager  
 $\beta R$  = Authorized Member

**amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

**Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)  
An effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the  
document's effective date on the Department of State's records.

This record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
The 90th day after the record is filed.

ated Nov 11, 1948

Signature of a member or authorized representative of a member

Epi. Fornis Borges  
Typed or printed name of signee