

L17000 243248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

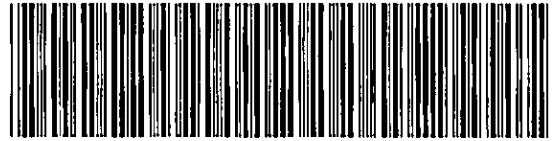
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JUL -2 AM 10:25

N COOPER

JUL 03 2018

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Central Florida Cleaning Services Group LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Jose A. Betancourt

Name of Person

Central Florida Cleaning Services Group LLC

Firm/Company

1256 Pin Oak Dr

Address

Apopka Florida 32703

City/State and Zip Code

jb@CFCleaningServices.com

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

For further information concerning this matter, please call:

Jose A. Betancourt

321 277-2603

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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
Chilton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Central Florida Cleaning Services Group LLC

(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

N/A

N/A

Enter Florida street address

Florida

Civ

Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jacqueline Rodriguez		<input type="checkbox"/> Add
		224 Village Ct. Davenport FL 3389	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jose A Betancourt	1256 Pin Oak Dr. Apopka FL 3270	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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E. Effective date, if other than the date of filing: 6/27/2018 12:01 am (optional)
(If 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)(b)
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.

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

Dated 6/27/2018

12:01 am


Signature of a member or authorized representative of a member

Jacqueline Rodriguez

Typed or printed name of signee