

U7000 2601 552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

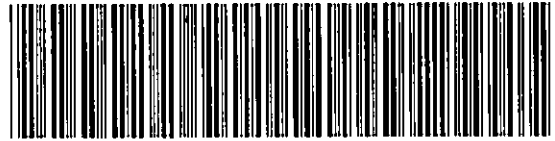
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 NOV 26 AM 11:23

JAN 07 2020
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLEANUP-US LLC
Name of Limited Liability Company

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DIVISION OF CORPORATIONS
19 NOV 25 AM 11:23

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

Please return all correspondence concerning this matter to the following:

FABIO ALMEIDA
Name of Person

Firm/Company

15051 ROYAL OAKS LN ART. 2602
Address

NORTH MIAMI FL 33181
City/State and Zip Code

cleanupus@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FABIO ALMEIDA at (305) 613 0995
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CLEANUP-US LLC

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

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19 NOV 26 AM 11:23

The Articles of Organization for this Limited Liability Company were filed on 12/26/2017 and assigned Florida document number LL7000261552.

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 "L.L.C."

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

_____, Florida _____
City 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SHEILA ZANGHETTIN	15051 ROYAL OAKS LN	<input checked="" type="checkbox"/> Add
		APT. 2602 NORTH MIAMI	<input type="checkbox"/> Remove
		FL 33181	<input type="checkbox"/> Change
P	FABIO ALMEIDA	15051 ROYAL OAKS LN	<input type="checkbox"/> Add
		APT. 2602 NORTH MIAMI	<input type="checkbox"/> Remove
		FL 33181	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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