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(RE	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: New B Cleaning L.L.C. 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:
Britney N. Garreto
New B Cleaning LLC Firm/Company
4712 WIND WOOD DR. Address
KISSIMMEE, FL 34746 City/State and Zip Code Manage to 2 (2) Command
Jmail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Britney Grance to at (774) 365-8856 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 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



New B Clea	ning LLC	THE SERVICE STATES
(Name of the Limited Lit (A Flo	ability Company as it now appears on our recor orida Limited Liability Company)	(ds.)
The Articles of Organization for this Limited Liability		and assigned
Florida document number <u>L18000242</u>	512	
This amendment is submitted to amend the following	g:	
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 "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET AL	ODRESS)	 -
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office a		ds, enter the name of the new
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street addr	ess
-		lorida
	Cirv	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

Title	<u>Name</u>	Address 4712 WINN WOOD DR.	Type of Action
AMBR	Britney GANETO	Address 4712 WINDWOOD DR. KISSIMMEE, FL 34746	Add
	J		☐ Remove
			Change
			Add
			Remove
			Charge Ti
			Remove
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			Change

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d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier	record specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier the 90th day after the record is filed.	ted <u>() (/b</u>	DUR 17 Signation	<u>, 2018</u>	· · · · · · · · · · · · · · · · · · ·			

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Filing Fee: \$25.00