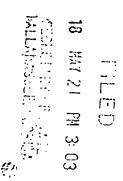
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(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone #/)
PICK-UP	WAIT	MAIL
	sings Entity Name	
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
	-	
Special Instructions to	Filing Officer:	





100313618831



COVER LETTER

	egistration Ser ivision of Corp			
cim irom		rcial Cleaning LLC		
SUBJECT	:	Name of Limi	ited Liability Company	
The enclose	ed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please retu	m all correspon	ndence concerning this matter	to the following:	
		Katelyn J Blondell		
			Name of Person	
		KB Commercial Services 1	LC	
		 	Firm/Company	<u></u>
	401 W BELVEDERE STREET			
			Address	161-
		LAKELAND, FL 33803		
			City/State and Zip Code	
		katiejblondell@yahoo.com	to be used for future annual report notific	ation)
For further	information co	oncerning this matter, please ca		,
Katelyn J	Blondeil		863 398-1813 at ()	Felephone Number
	Name of	f Person	Area Code Daytime T	Celephone Number
Enclosed is	a check for th	e 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

KB Commercial Cleaning LLC			
(Name of the Limited (A	Liablilty Comp Florida Limited	any as it now appears on our r Liability Company)	ecords.)
The Articles of Organization for this Limited Liab lorida document number L18000095795	ility Compan	y were filed on <u>04/16/2018</u>	and assigned
his amendment is submitted to amend the following	ing:		
. If amending name, enter the new name of th	e limited lia	bility company here:	
KB Commercial Services LLC			
he new name must be distinguishable and contain the word	ls "Limited Liab	oility Company," the designation	"LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable	le:	N/A	6
Principal office address MUST BE A STREET			
Inter new mailing address, if applicable:		N/A	20
Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>		
			G A
If amending the registered agent and/or egistered agent and/or the new registered office. Name of New Registered Agent:			cords, enter the name of the ne
		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	N/A	Para Pirania a de	-11
		Enter Florida street e	adaress
	 		_, 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>	Address	Type of Action
N/A			
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			☐ Change
			Add
			- Remoye
			- Change
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change

N/A			
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	4.50		Contract O
tive date, if other than the date effective date is listed, the date must be sp	ecific and cannot be prior to da	te of filing or more than 90 day	(optional) ys after filing.) Pursuant to 605.
If the date inserted in this block d ment's effective date on the Depart	oes not meet the applicable	statutory filing requiremen	its, this date will not be listed
ment s effective date of the Depart	nent of State 3 records.		
ecord specifies a delayed effo	active date but not ar	effective time at 12	01 a m on the earlie
e 90th day after the record i		refreedive cline, at 12	dimin on the come
April 25th	2018		
	1/10/11		
pately -	Tonach	representative of a member	

Page 3 of 3

Filing Fee: \$25.00