## L18000101932

(Requ	uestor's Name)	
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M. MILLIGAN AUG 21 2018

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: HONOMEX Cleaning Services 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:
Guillermo Gonzalez
Hondmex Claining Services, LC
1004 Mabry St.
Tallahassee F 32310 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chullermo Conzalez at (\$30) 274. (\$587)  Name of Person at (\$60) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{S30.00 Filing Fee & Certificate of Status} \Bigcup S55.00 Filing Fee & Certificate of Status & Certificate of S

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**

2018 AUG 21 PH 4: 59

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Hondmex Cleaning	a Services, LLC HASSEF FLORAD
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Tability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1800101933	were filed on $04/23/18$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil.  The new name must be distinguishable and contain the words Limited Liabil.  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 of	
registered agent and/or the new registered office address here	<u></u>
Name of New Registered Agent:	Mermo (sunzolez
New Registered Office Address:	Enter Florida street uddress
Tall	Chesse Florida 32310

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.

Tr Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3.

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 = N $AMBR = A$	lanager authorized Member		
Title	<u>Name</u>	Address	Type of Action
<u>AMBR</u>	Maria Del Carmen Mejici		
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(If an effective date Note: If the date	if other than the is listed, the date mus e inserted in this bl ctive date on the D	st be specific and ock does not t	d cannot be pric meet the appli	or to date of filin cable statutor	g or more than 90			
	ecifies a delayed ay after the rec			ot an effect	tive time, at	12:01 a.m. o	n the earlie	er of:
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Dated HUC		2	$\left( \right) _{\mathbf{k}}$	٠٠٠	<u> </u>			-~
Dated <u>FUC</u>	4	Signature of a	member or auth	horized represa	ntalive of a memi	der	F-67	2018 AUG 2

Page 3 of 3

Filing Fee: \$25.00