# 18000128498

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### TO: Registration Section Division of Corporations

	P&C COMMERCIAL AND RESIDENTIAL CLEANING SERVICES LLC
SUBJECT:	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:

ESTHER J MELENDEZ

Name of Person

EMES OF PINELLAS INC.

Firm/Company

6447 PARK BLVD STE 6

Address

PINELLAS PARK FL 33781

City/State and Zip Code

EMES@TAMPABAY.RR.COM

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

For further information concerning this matter, please call:

ESTHER J MELENDEZ

Name of Person

727 2897133 \_ at (\_\_\_\_\_) \_\_\_\_ \_\_\_\_ Area Code \_\_\_\_\_\_ Day

ode Daytime Felephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee □ \$30.00 Filing Fee & □ \$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

### P&C COMMERCIAL AND RESIDENTIAL CLEANING SERVICES LLC

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

The Articles of Organization for this Limited Liability Company were filed on 05/20/2018	and assigned
Florida document number L18000128498	

This amendment is submitted to amend the following:

### A. If amending name, enter the new name of the limited liability company here:

LUNA CLEANING SERVICES LLC	10		SEI
The new name must be distinguishable and contain the words "Limited Liabil			AH
Enter new principal offices address, if applicable:		Е [	ASS
(Principal office address MUST BE A STREET ADDRESS)		- 	<u> </u>
		<u>н</u> []-	FUO
		05	RID
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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	······	
New Registered Office Address:	Emer Florida street c	address
	Cirr	Florida Ziv 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. Thereby 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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

## MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
			Ə Add
			🗆 Remove
			Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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	TALLAHASSEE, FLORIDA
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	▶
06/01/2018	

E. Effective date, if other than the date of filing: 00/01/2018 (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)
<u>Note:</u> 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.

JUNE 0 Dated	4 2018
Dated	· · · · · · · · · · · · · · · · · · ·
	Selecce Paril
	Signature of a member or authorized representative of a member
<b></b>	
SEI	ENE PEREZ MARTINEZ

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00