

118000 130 830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

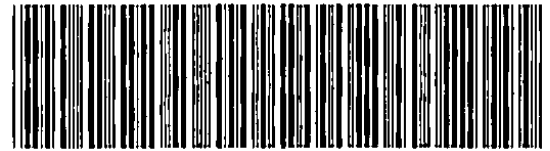
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 25 2019

SEP 25 2019
Clerk of Court

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLE Cleaning At Your Service LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gillian A Thomas

Name of Person

GLE Cleaning At Your Service LLC

Firm Company

1819 NW Sunset Blvd

Address

Tenison Beach, FL 32957

City, State and Zip Code

glecleaning@servicebeyond.com

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

For further information concerning this matter, please call:

Gillian A Thomas

Name of Contact

904

542-5408

Area Code

Office or Cellphone Number

Enclosed is a check for the following amount:

☐ \$35.00 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
Chilton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

OF ME Learning At Your Service, LLC

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

The Articles of Organization for this Limited Liability Company were filed on May 24, 2019 and assigned Florida document number 118000308 to

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 "LLC")

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

Collian A. Thomas

New Registered Office Address

(same)

Enter Florida street address

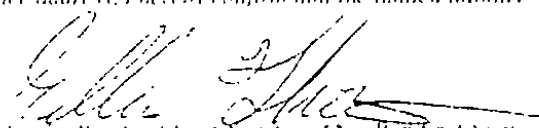
(same)

Florida

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:

MGCR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Michael A Thomas	1819 NW Sunset Blvd	☐ Add
		Jensen Beach, FL 33457	☒ Remove
			☐ Change
MGCR	Gillian A Thomas	1819 NW Sunset Blvd	☒ Add
		Jensen Beach, FL 33457	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

[illegible]

Note: 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.

Date: September 11th 2019

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APPROXIMATE NUMBER OF STUDENTS