11800172609

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



300315866853

07/23/18--01007--024 **25.00



D. BRUCE JUL 28 2018

COVER LETTER

TO:		istration Sectorial Sectorial Sectorial Section of Corp							
CUDICA	ere e	MACA GER	MAN QUALITY CLEANIN	G LLC					
SUBJEC	LI:	.	Name of Limi	ted Liability Company					
The encl	losed	Articles of A	mendment and fee(s) are sub	mitted for filing.					
Please re	eturn	all correspon	dence concerning this matter	to the following:					
			CAROLIN LORENZ						
				Name of Person		•			
MACA GERMAN QUALITY CLEANING LLC									
				Firm/Company		•			
			1915 SE 29TH LN						
Address CAPE CORAL, FL 33904				•					
				City/State and Zip Code		•			
			C.LORENZ89@YAHOO.C			· · · · ·			٠,
For furth	ner in	formation co	E-mail address; (t		ottheation)	,	SECRETAR TALLAHAS	2011 JUL 23	7
	•	Name of	Person	at () Area Code Dayt	time Telephone Number		Y 0F 8T	P# 4: 42	M
Enclosed	d is a	check for the	following amount:			:	STATE STATE	¥2	
S25.	00 Fi	lling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fi Certifica Certified (additional	te of Sta Copy	atus &	•	. •

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

MACA GERMAN QUALITY CLEANING	G LLC	
(<u>Name of the Limited Liab</u> (A Flor	illity Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 07/18/2018	and assigned
Florida document number L18000172609		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li-	mited liability company here:	April 27
The new name must be distinguishable and contain the words "I.	inited Linkility Company "the decimation "LLC" of	or the abbre stated "I T."
The new hante most be distinguishable and contain the words 1.	annico tracinty company, the designation trace of	N 111 201 1
Enter new principal offices address, if applicable:		T. (1)
(Principal office address MUST BE A STREET ADI	DRESS)	S 7 6
Enter new mailing address, if applicable:		20 F
(Mailing address MAY BE A POST OFFICE BOX)	 	· · ·
B. If amending the registered agent and/or registered agent and/or the new registered office ac		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	City	Zip Code
Nau Degistered Agent's Signature if changing Register	red Agent:	

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

/ MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	CAROLIN LORENZ	1915 SE 29TH LN	Add
		CAPE CORAL. FL 33904	Remove
			Change
			Remove
			☐ Remove
			Change
	 		SECR
			SECRE EXRY OF STATE LANGSSEE LORIDA COLUMN C
			Remove
			Change
			Add
			□ Remove
			☐ Change

		
		2015
	F.C.	
	芸ない	JUL 23
	SEC.	
	FLON	PE
	<u> </u>	կ։ կ2
E. Effective date, if other than the date of filing: (optional	l)	
(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 filin Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	g.) Pursuant to 605	.0207 (3)(ed as the
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m b) The 90th day after the record is filed.	. on the earlie	er of:
Dated 7/20/2018.		
Dated 7/20/2018 Concluded Concluded Signature of a member or authorized representative of a member	<u>.</u>	
CAROLIN LORENZ Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00