# L18000219444

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

Office Use Only



800334344428

09/25/19--01014--009 \*\*90.00

OCT 11 2019 S. YOUNG 19 SEP 25 PH 6: 11
SET TABLE FEORIDA
ALLAHASSZET, FEORIDA

### **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: The	Winter Gard Name of Limi	den Cleaning ( ited Liability Company	CompanyLIC
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Tamara Let	Some Name of Person	
	The Winter Go	arden Cleaning Co	mpanyLLC
	1606 0017	Address	
	Winter Gord	en FL 34787 City/State and Zip Code	
	Winter Garder E-mail address: (1	O be used for future armudi report notific	any agmail com
For further information co	encerning this matter, please ca	ıll:	
Tamara Le	Person	at (40+) Ho-Gaytime	Telephone Number
Enclosed is a check for the	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

The Winter Gard	en Cleaning	ampany L	L-CO 50
(traine of the Entitle	d Liability Company as it now appe A Florida Lumited Liability Company	ars on our records. 1	E SH T
The Articles of Organization for this Limited Lie		1/14/2018	and assigned
Florida document number L1800010	7444	•	
This amendment is submitted to amend the follow	wing:		6: 11 0:000
A. If amending name, enter the new name of	the limited liability company l	<u>nere</u> :	J. P
The name pages must be declined should and another than	alastina di Ura o		
The new name must be distinguishable and contain the wo		designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		<u> </u>
(Principal office address MUST BE A STREET	`ADDRESS)		<del></del>
The State of the S			
Enter new mailing address, if applicable:			
<u>(Mailing address MAY BE A POST OFFICE B</u>	<u>OX)</u>	<del></del>	
	<del></del>		
D 16			
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address o ce address bara:	n our records, <u>ente</u>	r the name of the new
The second of th	ee address here.		
Name of New Registered Agent:			
N			
New Registered Office Address:	Enter Flo	orida street address	
	Circ	Florida _	Zip Code
	√i <b>ņ</b>		гар с оне

#### 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

$AMBR = A_1$	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TomaraleHome	1006 Dolphin Dr. Winter Garden Fl 34	Add F T Remove
AMBR	Mona Erickson	1006 Dolphin Dr. Winter Garden FL 34	
			Change
			□ Remove
			Change
			Add
			Remove
		·	Change
	<del></del>		
		·	🗆 Remove
			Change
<del></del>			
		<del></del>	Петюve
			Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  The 90th day after the record is filed.
Dated
Signature of a member or authorized representative of a member
Tomara lettsome Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00