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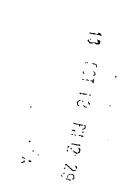
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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
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ICT MILE

COVER LETTER

Divis	ion of Corp	orations		
SUBJECT: _	Faith Co	mmercial Cleaning Services		
SUBJECT: _		Name of Limit	ed Liability Company	
The enclosed A	Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return a	ill correspor	ndence concerning this matter to	o the following:	
		Josefina Fermin		
			Name of Person	
		Faith Commercial Cleaning	Services	
			Firm/Company	
		6214 Oak Bluff Way		
			Address	
		Lake Worth FL 33467		
			City/State and Zip Code	
		josefinaf123@hotmail.com	1.6	· · · · · · · · · · · · · · · · · · ·
		h-maii address: (to	o be used for future annual report notif	ication)
For further inf	formation co	oncerning this matter, please ca	II:	
Josefina Ferm	iin		561 358-5315	
	Name of	Person	at () Area Code Daytime	: Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 Fi	ling 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)

Registration Section

TO:

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

(Name of the Limited L	Jability Company as it now appears on our records. Iorida Limited Liability Company))
The Articles of Organization for this Limited Liabil florida document number L18000229832	lity Company were filed on 09/27/2018	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	<u></u>
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC"	
Enter new principal offices address, if applicable Principal office address MUST BE A STREET A		8 71 72 79
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO.	<u></u>	
3. If amending the registered agent and/or egistered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
_	, Flo	rida
_	City	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Josefina Fermin	6214 Oak Bluff Way Lake Worth FL 33467	
			☐ Remove
AMBR	Yesenia Guzman Vega	12429 Colony Preserve Drive Boynton Beach FL 33436	Add
			Remove
			☐ E Change
			cc
			Remove
			☐ Change
			Add
			Remove
			Change
			Add
			☐ Remove
			☐ Change
			O Add
			□ Remove
			Change

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g: If the date inserted in this block does not meet the applicable statutory filing requirements,	otional)	S 0.207
	this date will not be lis	ted as
iment's effective date on the Department of State's records.		
ecord specifies a delayed effective date, but not an effective time, at 12:0	1 a.m. on the earli	ier of
ne 90th day after the record is filed.		
ed 10/15/2018		
120 Aina Korin		
Signature of a member or authorized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00