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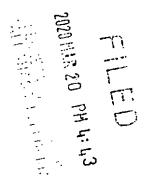
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Amend/Name Chs

> MAR 20 2020 I ALBRITTON

## COVER LETTER

\_TO: Registration Section
Division of Corporations

Tallahassee, FL 32314

		•	
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Linda Hubert		
	<del></del>	Name of Person	
	Name of Limited Liability Company  des of Amendment and Ice(s) are submitted for filing.  orrespondence concerning this matter to the following:  Linda Hubert  Name of Person  Income Tax & More  Firm/Company  2800 Aurora Rd Suite C  Address  Melbourne, FL 32935  City/State and Zip Code  Joe@daniellebusiness.com  E-mail address: (to be used for future annual report notification)  at (  Area Code Daytime Telephone Number  Area Code Daytime Telephone Number  of or the following amount:  Fee \$30.00 Filing Fee & St.00 Filing Fee & Certificate of Status  Certificate of Status  Certificate Copy (additional copy is enclosed)  Address:  tion Section Registration Section Division of Corporations		
		Firm/Company	
	2800 Aurora Rd Suite C		
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Linda Hubert  Name of Person  Income Tax & More  Firm/Company  2800 Autrora Rd Suite C  Address  Melbourne, FL, 32935  City/State and Zip Code  Joe@daniellebusiness.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Linda Hubert  Name of Person  Area Code  Name of Person  Enclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certificate of Status  Certificate Orpy (additional copy is enclosed)  Mailing Address:  Registration Section  Registration Section			
	Melbourne, FL 32935		
2800 Aurora Rd Suite C  Address  Melbourne, FL 32935  City/State and Zip Code  Joe@daniellebusiness.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Linda Hubert  321 751-2400			
	<del>-</del>		
	E-mail address: (	to be used for future annual report noti-	fication)
For further information c	oncerning this matter, please ca	all:	
Linda Hubert		321 751-2400	
Name of Person Area Code Daytime Telephone Number		e Telephone Number	
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	<del>-</del>	Certified Copy	Certificate of Status &
			etion
	•		•
P.O. Box 632	1	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



March 4, 2020

LINDA HUBERT INCOME TAX & MORE 2800 AURORA RD - STE. C MELBOURNE, FL 32935

SUBJECT: ATLANTIC COAST WINDOW CLEANING LLC

Ref. Number: L18000253501

We have received your document for ATLANTIC COAST WINDOW CLEANING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete/submit the form in its entirety.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00004743

Irene Albritton Regulatory Specialist II

2:1 :A 02 :U18707

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TO	AMENDMENT  O  RGANIZATION		
	Ol			man Maria Car
Atlantic Coast (Name of the Limited			LLC records.)	and assigned the
The Articles of Organization for this Limited Liab Florida document number <u>L 180002533</u>	ility Company (	were filed on	29/18_	and assigned 🥙
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the AHlant, a Exter The new name must be distinguishable and contain the work	7015 4	LLC	"LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicab				
(Principal office address MUST BE A STREET)		906 Glen Palm Bay	FL 3	2905
		7,		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	906 Glenh.	am Di FL 32	NE 2905
B. If amending the registered agent and/or reg agent and/or the new registered office address b		ddress on our records, <u>s</u>	enter the nam	e of the new registered
Name of New Registered Agent:	Jose	sh M Dance	11e	
New Registered Office Address:	2300	AUTOTA Rd Enter Florida street	Su (+	e C
	Melbour	<u>ا ا</u>	_, Florida	32935
		CHY		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. Lhereby 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>	Address	Type of Action
MGRM	Derek Perreira	906 Glenham Dr	□Add
		906 Glenham Dr Palm Bay, Fl	□Remove
		3 2905	ZChange
	•••		🗆 Add
			□Remove
			□Change
			🗆 🗆 🗆 🗆
		<del> </del>	
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			□Change
			□Add
			□Remove
			□ Change

Effective date, if other than the date of filing: (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.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records.	0207 (3 d as th
he 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 ord is filed.	the
Dated March 11 . 2020.  Wereh Parun—  Signature of a member or authorized representative of a member	
March Panen	
Derek Perce Ica Typed or printed name of signee	

Filing Fee: \$25.00