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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	SHOUS Name of Lim	Way YIOY ON ited Liability Company	intercial Cleaning, LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Summa Prestigi	Name of Person OUS WAYY) Firm/Company	or Commercial Wecerun
	Pensal Presticio	Address Ola FC City/State and Zip Code Obe used for future annual report not	Dywail.com
For further information e	concerning this matter, please ca	all:	
Summar Name o	Bradley of Person	at (<u>S50</u>) <u>2 (o l</u> Area Code Daytim	4265 e Telephone Number
Enclosed is a check for the	he following amount:		
₽ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional 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 Articles of Organization for this Limited Liability Company were filed on $\frac{02-15}{}$ Florida document number <u>L 1900</u>0046020. 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 "L.L.C." 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 näme registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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>	Address	Type of Action
AMBR	Patrich Bradley	2013 Cambridge Circle Pensacon, FL 3254	Add
	O (Tensacoh, FL 3254	□ Remove
			Change
			Add
			Remove
			Change
			
			Remove
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			O Add
			□ Remove
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			□ Remove
			Change
			□ Add
			_□ Remove
			☐ Change

	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E	IN number Tax ID-
	833752627

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-	
	
Effective dat	te, if other than the date of filing: (optional) late is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.01
Note: If the o	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed effective date on the Department of State's records.
document s c	receive date on the Department of state's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
) The 90th	day after the record is filed.
Dated	-06-2019
Dated	
	Jumma Isoadles
-	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00