# L1900036718

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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Set 5 Per Set 170.  Name of Limited Liability Company  State of Cleaning & Penting Services
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Se J Cleaning Renting Services  Set Bennoch ing Services  Firm/Company  Po Box 35475 Panama Cat III  Address  Torida 37412  City/State and Zip Code  Silvanapined 10 a Small cum  E-mail address: (to believed for future annual report foodification)
For further information concerning this matter, please call:
Si Cana Poeda at (850) 851 - 7967  Name of Person Afea Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Solution Status Solution Solution Status Solution Solutio

### 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 1.1mired Liability Compa (A Florida Limited L	
The Articles of Organization for this Limited Liability Company Florida document number <u>Li9 000056718</u>	were filed on 03-07-2019 and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	ijity company here:
The new name must be distinguishable and contain the words "Limited Liabil 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 of registered agent and/or the new registered office address here	Panama City, FI 3240Y TI  Po Bot 35:473 D  Panama City, FI 57  Pan
Name of New Registered Agent:  New Registered Office Address:	
new registered Office Address.	Enter Florida street address , Florida 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>	Name	Address	Type of Action
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