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## **COVER LETTER**

TO:

TO:	Registration So Division of Cor				
eni <b>d</b> era		Janitorial Services, LLC			
SUBJEC	-I: <u></u>	Name of Lim	ited Liability Company		
*** *			:10		
		Amendment and fee(s) are sub ondence concerning this matter	•		
r rease re	ituin an correspe	matter concerning this matter	to the following.		
		Scott Beam			
			Name of Person	TAIL AND THE PERSON OF THE PER	~1
		Reef Point Janitorial Servi	ces, LLC		ا مر
			Firm/Company	5. 1	~
		3675 Seaside Dr Apt 440		TALLANDESELFLORIDA	_
			Address		
		Key West, FL 33040		10 A	
		Scottybeam@gmail.com	City/State and Zip Code		
			to be used for future annual report notif	fication)	
For furth	er information c	oncerning this matter, please c	·	,	
Scott Bo	eam		305 619-3701		
	Name o	of Person	at ()	e Telephone Number	
Enclosed	l is a check for th	he following amount:			
	OO) 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)	
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURING Registration Section Division of Corpora Clifton Building	n	

2661 Executive Center Circle Tallahassee, Fl. 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Reef Point Janitorial Services, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our i liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000133032</u>	were filed on 5/16/2019	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	**· *
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		A Liu
		<u> </u>
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		ξ, <u>σ</u>
If amending the registered agent and/or registered of egistered agent and/or the new registered office address here  Name of New Registered Agent:		ecords, enter the name of the
M. D		
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>	<u>Name</u>	Address	Type of Action
AMBR	Scott Beam	3675 Seaside Dr Apt 440 Key West, FL 33040	Add
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			□ Add
			Remove  Change
			Add Add Remove
			☐ Change
<del></del>			
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ective date, if other than the effective date is listed, the date	the date of fili	ng:	or to date of file	ng or more than 90	(optional)	Dursuant :	IA 605 02:
e: If the date inserted in this ument's effective date on the	s block does not	meet the appl	icable statuto	y filing requirer	nents, this date	will not b	e listed a
union senective date on the	. Department of	State S record					
record specifies a delay	yed effective	date, but r	ot an effec	tive time, at	12:01 a.m. (	on the e	earlier :
he 90th day after the r	ecord is filed	<b>d</b> .					
June 10	_	2019					
ed	) , ,		<del></del> ·				
V	2 11/1/11/11	9 _					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00