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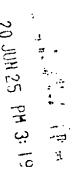
(Requestor's Name)
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COVER LETTER

TO:

TO: Registration Se Division of Cor					
MJ Cleanin	g Pros LLC	•	,	₹.·	
SUBJECT:	Name of Lim	ited Liability Company		The second	
The anglesed Articles of	Amendment and fee(s) are sub	mitted for filing		20 Miles 64 3: 10	
		_		، جن	
Please return all correspo	ndence concerning this matter	to the following:		(0	
	Melvin Gutierrez				
		Name of Person			
	MJ Cleaning Pros LLC				
		Firm/Company			
	1436 Longarzo PL				
		Address			
	West palm Beach, Florida	33415			
	MICharina Drovi I. C. Character	City/State and Zip Code			
	MJCleaningProsLLC@gm: E-mail address: (to be used for future annual report notifi	cation)		
For further information c	oncerning this matter, please c	•	,		
Melvin Gutierrez		561 351-5409			
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 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)		
Mailing Addres Registration S		Street Address: Registration Sec	tion		
Division of Corporations		Division of Corp	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
rananassee, i	(L JZJ 14	Tallahassee, FL			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- College State of the state of

MJ Cleaning Pros LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed onand assigned
Florida document number L190002000686	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
MJ Bathroom, Kitchen & Flooring LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1436 Longarzo PL
(Principal office address MUST BE A STREET ADDRESS)	WPB, FL 33415
Enter new mailing address, if applicable:	1436 Longarzo PL
(Mailing address MAY BE A POST OFFICE BOX)	WPB, FL 33415
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new registered</u>
New Registered Office Address:	Enter Florida street address
	, Florida
	City , Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
If Char	oring Registered Agent Signature of New Pentstered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

Address

Type of Action

GR = Manager MBR = Authorized Member

<u>Name</u>

<u>tle</u>

GC	OMEZ, JOHANA N	1436 LONGARZO PL	🗀 Add	
		WEST PALM BEACH, FL 33415	Remove	
			□Change	
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amending any other miorita	tion, enter change(s) here: (Attach additional sheets, if necessary.)	
		
 		
 		
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Hective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the Do	date of filing:	5.020 ed a
record specifies a delayed effective is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day afte	r the
June 7	2020	
	Signature of a member or authorized representative of a member	
Melvin Gutierrez		

Filing Fee: \$25.00