L19000 283976

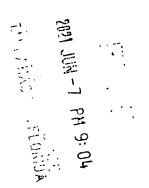
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COVER LETTER

Division of Cor		•	:
Southwest SUBJECT:	Cleaning Services, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	-	
	Victor Pena		
		Name of Person	
	Southwest Cleaning Service	res, LLC	
		Firm/Company	
	Firm/Company 1217 Crestwood Blvd Address		
		Address	
	Lake Worth, FL 33460		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	victoromarpenapalma@hoti		
For further information c	noncerning this matter, please c	to be used for future annual report notif all:	fication)
Victor Pena		561 420-3902 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	S30.00 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 Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southwest Cleaning Services, LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	y as it now appears on ou ability Company)	ır reçords.)
The Articles of Organization for this Limited Liability Company we Florida document number L19000283976	vere filed on 11/21/20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
he new name must be distinguishable and contain the words "Limited Liability	y Company," the designati	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		وہ
Principal office address MUST BE A STREET ADDRESS)	N/A	2 2
		in the second se
		<u> </u>
Enter new mailing address, if applicable:		P
Mailing address MAY BE A POST OFFICE BOX)	N/A	9:
		26 9
 If amending the registered agent and/or registered office ad gent and/or the new registered office address here: 	dress on our records	s, enter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
		, Florida

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
MGR	Sonnia Velasco	187 Berkshire I	≣ Add
		West Palm Beach, FL 33417	□Remove
			■Change
MGR	Victor Pena	68 Berkshire C	
		West Palm Beach, FL 33417	□Remove
			□Change
			Add Remove -
			—————————————————————————————————————
			□Remove
		<u> </u>	□Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot lote: If the date inserted in this block does not meet the ocument's effective date on the Department of State's respective.	: applicable st	of filing or more than atutory filing requir	(option 90 days after fil ements, this d	al) ling.) Pur: late will	suant to 605.02 not be listed
record specifies a delayed effective date, but not an effe l is filed.	ective time, at	12:01 a.m. on the e	arlier of: (b)	The 90:	th day after th
ated	<u> </u>	(j)			
Y U	eu 1				
Signature of a member	or authorized p	epresentative of a me	noci		