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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PASCO-HERNANDO ROOF & PRESSURE CLEANING SERVICES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRUCE GUNDY

Name of Person

PASCO-HERNANDO ROOF & PRESSURE CLEANING SERVICES LLC

Firm/Company

5124 ELWOOD RD

Address

SPRING HILL FL 34608

City/State and Zip Code

GUNDYMEL@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRUCE GUNDY

352 232-0801

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

PASCO-HERNANDO ROOF & PRESSURE CLEANING SERVICES 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 on 01/17/2020 and assigned
Florida document number L20000024387.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SPRING HILL CLEANING SOLUTIONS LLC

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)

5124 ELWOOD RD

SPRING HILL, FL

34608

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5124 ELWOOD RD

SPRING HILL, FL

34608

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

BRUCE GUNDY

New Registered Office Address:

5124 ELWOOD RD

Enter Florida street address

SPRING HILL

Florida 34608

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MELISSA GUNDY	5124 ELWOOD RD	<input type="checkbox"/> Add
		SPRING HILL, FL	<input checked="" type="checkbox"/> Remove
		34608	<input type="checkbox"/> Change
AMBR	ELLIS GUNDY	2237 LAREDO AVE	<input type="checkbox"/> Add
		SPRING HILL, FL	<input checked="" type="checkbox"/> Remove
		34608	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 MAR - 2 PM 10:15

2020 MAR -2 AM 10:19

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated **FEBRUARY 27**

2020

Signature of a member or authorized representative of a member

BRUCE GUNDY

Typed or printed name of signee

Filing Fee: \$25.00