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## **COVER LETTER**

**Registration Section** 

TO:

Division of Co	rporations			
	AINTING AND CLEANING SI	ERVICE. LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
		_		
Please return all corresp	ondence concerning this matter	to the following:		
	SUYAPA U AVILEZ VEI	LASQUEZ		
		Name of Person		
	MANA PAINTING AND	CLEANING SERVICE, LLC		
		Firm/Company		
	1138 NAVAJO AVE			
	-	Address		
	LEHIGH ACRES, FL 339	36		
		City/State and Zip Code		
	JOEMARVENDING@GM			
		to be used for future annual report no	otification)	
For further information	concerning this matter, please c	all:		
SUYAPA U AVILEZ V	/ELASQUEZ	561 667-0877 at ( )		
Name	of Person		ime 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 Addre		Street Address:	Section	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 63		The Centre of		
Tallahassee.	FL 32314	2415 N. Mont	roe Street, Suite 810	

RECEIVED
APR 28 2020

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MANA PAINTING AND CLEANING SERVICE, 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 1/22/2020 and assigned Florida document number 1.20000028633 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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: New Registered Office Address: Enter Florida street address \_, Florida \_

## 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.

City

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>	Type of Action
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		LEHIGH ACRES, FL 33936	≅ Remove
			☐ Change
P	Innocente S Aviles	1138 NAVAJO AVE	<b>=</b> Add
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