L20000 30286

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700342100817

03/16/20--01020--009 ★★30.00

SECRETARY OF STATE

.028 HAR | 6 PH 4: 2

COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations			
	CLERS CL	EANING & RESTORATION	SERVICES, LLC.		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		ŁENIN JAVIER GALLAI	RDO ALMAO		
			Name of Person	 	
		CLERS CLEANING & RI	ESTORATION SERVICES, LLC	<u>.</u>	
Firm/Company					
	34970 SW 188TH AVE. #467,				
Address					
	HOMESTEAD, FL., 33034				
			City/State and Zip Code		
		gallardo.lenin@gmail.com	to be used for future annual report no		
For further in	nformation co	oncerning this matter, please co		otnication)	
LENIN J. G		,	786 307.91.41		
Name of Person		at () Area Code Daytime Telephone Number			
	Name of	reison	Alea Code Dayi.	mie Teiephone Number	
Enclosed is a	check for th	e following amount:			
□ \$25.00 F	Filing Fee	■ \$30.00 Filing Fec & Certificate of Status	S55 00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	iling Addres gistration S		Street Address: Registration S	Section	
	-	orporations	Division of C	orporations	
). Box 632		The Centre of		
1 al	Jahassee, F	L 32314	2415 N. Moni	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLERS CLEANING & RESTORATION 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 January 24, 2020 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CLERS CLEANING SERVICES, 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) 5 N/A 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: N/A Name of New Registered Agent: N/Λ New Registered Office Address:

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.

Cuv

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

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

Title	Name	Address 1	Type of Action
			_ 🗆 Add
			_ □ Remove
			_ 🗆 Change
			_□Add
			_ 🗆 Remove
			_ □Change
			_ 🗆 Add
		ALL MHAS	_ Datemove .
		SEE FE ORID	Change
		••	_ □Remove
		-	_ □Change
			_ 🗆 Add
			_ 🗆 Remove
			_
		_	_ □Add
			_ 🗆 Remove
			□ Change

			<u> </u>		· · · · · · · · · · · · · · · · · · ·	
			•			
						
	 -					
			 			
			,	<u></u>		
						
						
				····-	<u> </u>	202 0 F
					7.70 7.70 7.70	HAR-
					SSE	<u> </u>
						= ;
-	•		·		ORID ORID	<u>÷:</u>
						_
		03/15/2020				
ective date, if other than a effective date is listed, the date	e must be specific and	cannot be prior t		more than 90 days		
te: If the date inserted in the	nis block does not m he Department of St		ble statutory fil	ing requirement	s, this date will no	ot be listed a
cument 5 effective date on a	•					
cument's effective date on t		an affantius ti-	ne, at 12:01 a.m	on the earlier o	of: (b) The 90th	day after the
ecord specifies a delayed eff	ective date, but not	an enective (III		on the ourner		
ecord specifies a delayed eff	ective date, but not	ai chechye (it		. on the outlier		
ecord specifies a delayed eff is filed	ective date, but not	2020		. 57, 210		
ecord specifies a delayed eff is filed	ective date, but not		_· 			
ecord specifies a delayed eff is filed	Luu	2020 V kuw -	ized representati			

Filing Fee: \$25.00