LZ0000067988

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO:

Tallahassee, FL 32314

| | gistration Se vision of Cor | | · | |
|---|--------------------------------|--|---|--|
| cub uvom | | mercial Cleaning | , | |
| SUBJECT | : | Name of Lim | ited Liability Company | |
| The enclose | ed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please retur | n all correspo | endence concerning this matter | to the following: | |
| | | Percivas Daniels | | |
| | | | Name of Person | |
| | | Prime Commercial Cleaning | ng | |
| | | | Firm/Company | |
| | | 2130 Oakmont Drive | | |
| | | | Address | |
| | | Riviera Beach, FL 33404 | | |
| | | | City/State and Zip Code | ····· |
| | | primecommercialclean@gm | nail.com to be used for future annual report noti | Factory |
| For further | information c | oncerning this matter, please of | · | incation) |
| Zabian Do | wdell | | 561 6026054 | |
| | Name o | f Person | at () Area Code Daytim | e Telephone Number |
| Enclosed is | a check for th | 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) |
| | ailing Addres | | Street Address: Registration Sec | ction |
| Registration Section Division of Corporations | | | Division of Cor | |
| | P.O. Box 6327 | | The Centre of T | • |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2.33 A** 17 A** 10: 41

| PRIME COMMERCIAL CLEANING LLC | |
|---|---|
| (Name of the Limited Liabil (A Florid | ility Company as it now appears on our records.) da Limited Liability Company) |
| The Articles of Organization for this Limited Liability Corida document number L20000067988 | Company were filed on 03/02/2020 and assigned |
| his amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the lim | nited liability company here: |
| he new name must be distinguishable and contain the words "Lir | imited 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 ADD | DRESS) |
| | |
| | |
| Enter new mailing address, if applicable: | |
| Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| 3. If amending the registered agent and/or registere | ed office address on our records, enter the name of the new regis |
| gent and/or the new registered office address here: | : |
| Name of New Bogistand Agents | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| THE WINDESTITUTE PROGRESS. | Forton Electrical estados and decomo |
| New Registered Office (Tadies). | Enter Florida street 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.

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 11.3 M 17 A1110: 41 | Type of Action |
|--------------|----------------|---|----------------|
| MGR | Zabian Dowdell | 199 N ELM AVENUE | |
| | | PAHOKEE, FL 33476 | □Remove |
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| ective date, if other than the dat | te of filing: (optional) | |
| effective date is listed, the date must be | specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant does not meet the applicable statutory filing requirements, this date will not b | |
| ument's effective date on the Depar | rtment of State's records. | |
| cord specifies a delayed effective da | ate, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day | v after t |
| s filed. | • | |
| , AUGUST 11 | 2020 | |
| ed AUGUST 11 | nature of a member or authorized representative of a member | |
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| Tercino Van | | |

Filing Fee: \$25.00