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Special Instructions to	Filing Officer:	·
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Office Use Only



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Letter Number: 820A00009873

## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 14, 2020

XAVIER HERNANDEZ 8385 SW 94 STREET MIAMI, FL 33156

SUBJECT: THE GERMBUSTERS LLC

Ref. Number: L20000099338

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

, TO: Registration Section
Division of Corporations

	MBUSTERS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The unchased Amieles of	·	unional Can Clina	
	Amendment and fee(s) are sub	_	
Please return all correspo	ondence concerning this matter	to the following:	
	XAVIER HERNANDEZ		
		Name of Person	
	THE GERMBUSTERS L	LC	
		Firm/Company	-
	8385 SW 94 STREET		
		Address	
	MIAMI FLORIDA 33156		
	<del></del>	City/State and Zip Code	
	info@germbusters305.co		
		to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
XAVIER HERNANDE	Z	786 564-9205	
Name (	of Person		ne Telephone Number
Enclosed is a check for t	he 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 Registration Division of O P.O. Box 63: Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### THE GERMBUSTERS LLC

THE OPTIMIDOSTERS ELO			
. (Name of the Limi	ted Liability Company (A Florida Limited Liab	as it now appears on our records bility Company)	
he Articles of Organization for this Limited L Iorida document number L20000099338	iability Company we	ere filed on APRIL 8,2020	and assigned
his amendment is submitted to amend the foll	owing:		
If amending name, <u>enter the new name o</u>	f the limited liabilit	y company here:	
he new name must be distinguishable and contain the	vords "Limited Liability	Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applie	rable:		.*
Principal office address MUST BE A STREI	ET ADDRESS)	<u></u>	707
	-		
			1 2
nter new mailing address, if applicable:	-		· 11
(Mailing address MAY BE A POST OFFICE BOX)			· <sup>T</sup> J
	_		<del>-</del>
			8
<ol> <li>If amending the registered agent and/or gent and/or the new registered office addre</li> </ol>		dress on our records, <u>enter t</u>	he name of the new registe
Name of New Registered Agent:	TERESITA BAR	DISA	
New Registered Office Address:	2100 SW 125 C	Т	
real registered Office radices.		Enter Florida street address	
	MIAMI	, Flo	rida <sup>33175</sup>
		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

Title	Name	Address	Type of Action
MGR	TERESITA BARDISA	2100 125 CT Miami Florida, 33175	■ Add
\$			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
-			□Remove
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		<del></del>	Remove
			Change

_	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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m efl <u>ote:</u>	ive date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ted	4/24/20
	Signature of a member or authorized representative of a member  Vale C Hunandtl  Typed or printed name of signer

Filing Fee: \$25.00