# LZ0000 137613

(Re	questor's Name)	1
_		
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	ie #)
PICK-UP	☐ WAIT	MAIL
	·	
(Bu	siness Entity Na	me)
·	cument Number	,
(LO	cument Number,	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	<u>·</u>
	0	12214
	~	122/21

Office Use Only .



400356522354

12/21/20--01042--006 \*\*30.00

2021 FEB 22 PH 6: 50 SECRETARY OF STATE

3/1/21



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2021

HOLLY L. THOMAS 3633 PEPPER LANE NEW SMYRNA BEACH, FL 32168

SUBJECT: HOLLY'S CLEANING & SERVICES, LLC

Ref. Number: L20000137613

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 821A00002687

Querida R Moore Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

TO: Registration Division of C							
	Cleaning & Services LLC	•					
SUBJECT:	Name of Lin	nited Liability Company					
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.					
Please return all corres	spondence concerning this matter	to the following:					
	Holly L. Thomas						
	Name of Person						
Holly's Cleaning & Services LLC							
		Firm/Company	<del></del>				
	3633 Pepper Lane						
		Address					
	New Smyrna Beach Fl 32	168					
	,	City/State and Zip Code	<del></del>				
	holly.thomas1123@gmail.c						
	E-mail address: (	to be used for future annual report notif	ication)				
For further information	n concerning this matter, please c	all:					
Holly L. Thomas		386 214-3221					
Name of Person			Telephone Number				
Enclosed is a check fo	r the following amount:						
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	LJ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Add	ress:	Street Address:					

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO FILED ARTICLES OF ORGANIZATION OF

2021 FEB 22 PM 6: 50

HOLLY'S CLEANING & SERVICES LLC

(Name of the Limited Liability Company as it now appears on oor records

The Articles of Organization for this Limited	Liability Company we	, ,	020	
Florida document number L20000137613				_ and asinghed
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liabilit	y company here:		
he new name must be distinguishable and contain the	words "Limited Liability	Company," the design	ation "LLC" or the abbre	viation "L.L.C."
Inter new principal offices address, if applicable:		3633 Pepper Ln. Nev	w Smyrna Beach Fl 32	168
(Principal office address MUST BE A STRE	EET ADDRESS)			<del></del>
(Mailing address MAY BE A POST OFFICE	<u>E BOX)</u> -			
B. If amending the registered agent and/or agent and/or the new registered office addr		iress on our recor	ds, <u>enter the name o</u>	f the new regis
Name of New Registered Agent:	Holly L. Thomas			
New Registered Office Address:	3633 Pepper Lanc			
······································		Enter Florida si	treet address	
	New Smyrna Beac	<del></del>	, Florida <u>32168</u>	
	<del></del>	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.

City

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	Type of Action
President/	Holly L. Thomas	3633 Pepper Lane New Smyrna Beach Fl 32168	<b>=</b> Add
			□Remove
			□ Change
			🗀 Add
			□Remove
			□Change
			Uadd
			□ Remove
			□Change
			[]Add
		□Remove	
			□Change
			□Add
			□ Remove
			□ Change
			∐Add
			□Remove
			□ (Shamus

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_ \_ (optional) (If an 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 to 605.0207 (3)(b) 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. If the record 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 record is filed.

Filing Fee: \$25.00