

L20000167170

(Requestor's Name)
(Address)
7/44
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600358987866

03/01/21-+01096--013 **60,08

2021 FEB -1 PH 12: 54

a lada O

Attention Irene Albritton,

Thank you for your attention to this matter, I have submitted a name change previously and was denied due to the name being unavailable. I have chosen a new name for the company and have added new details to the amendment packet. Thank you for your patience regarding this matter. I have also included another check for this change just in case it is needed. Please contact me directly with any questions.

Kind Regards,

Maria Lubo 239-287-0501 Quailtycleaning239@gmail.com 1150 Turtle Creek Blvd #817 Naples, FL 34110

COVER LETTER

TO: Registration Sectorial Division of Corp.			
SUBJECT K	M Home Se	rvices LLC	
SUBJECT:		ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Maria G.	Lubo	
		Name of Person	
		Firm/Company	
	1150 Turtl	ie Creek Blvd,	#817
		1110	
	Naples, FI	City/State and Zip Code	
	Quality Cl E-mail address: (to	City/State and Zip Code Ceaning 239 be used for future annual report notificate	gmail.com
For further information co	ncerning this matter, please cal		
Maria G. Name of	Lubo Person	at (<u>239</u>) <u>287-0</u> Area Code Daytime To	0501 Elephone 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 Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company as it now appears on our records.)

Tri fortula il ilinia ilinia il ilinia il ilinia ilin	naome company,
The Articles of Organization for this Limited Liability Company Florida document number <u>L 26000167170</u> .	were filed on June 16, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liability Contains the words "Liability Co	ity Company," the designation "LLC" or the abbreviation "LLC,"
Enter new principal offices address, if applicable:	21715 Helmsdale Run
(Principal office address MUST BE A STREET ADDRESS)	Estero, FL 33928
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	21715 Helmsdale Run Estero, FL 33928
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: Marie	a Gr. Lubo
New Registered Office Address: 21716	Helmsdale Run =
Ester	City Florida 33928.
New Registered Agent's Signature, if changing Registered Agent:	1 A N. 2.

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>	Name	Address	Type of Action
MGR	Luz Sanchez	21715 Helmsdale Rur	⊠Add
		Este10, FL 33928	□Remove
			□Change
AMBR	Kevin A. Lubo	1150 Turtle Creek Bl	<u>Id</u> □Add
		#817 Naples, FL 3411	O_ □Remove
			\(\sigma\) Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove
			□Change

	•				
					
···				<u> </u>	
					
					
		 -	<u></u>		
					
•					
					
					
					
on				(
an effective date ote: If the dat	if other than the date of is listed, the date must be specified inserted in this block does ctive date on the Department	fic and cannot be prior to not meet the applicab			
record specifie is filed.	s a delayed effective date, bu	it not an effective time	e, at 12:01 a.m. on the	earlier of: (b) The 90th	day after the
ated <u>Thur</u>	s. January 28	8 2021	-·		
	1/4	Sub	zed representative of a m	ember	
	- "/	<i>f</i>			