## L20000175630

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## **COVER LETTER**

TO:

	Registration S Division of Co				f	
	Alicia Ran	nirez Cleaning LLC		4	* · · · ·	
SUBJEC	.T:	Name of Lin	nited Liability Compar	ny		
The enck	nsed Articles of	`Amendment and factor are sub-	amittad for filing			
		- (	_			
		Brooke O'Neill				
			Name of Perso	on		-
			Firm/Compan	ly.		-
	Alicia Ramirez Cleaning LLC  Name of Limited Liability Company  closed Articles of Amendment and feets) are submitted for filing.  return all correspondence concerning this matter to the following:    Brooke O'Neill					
		Vero Beach, FL 32963	Address			
			City/State and Zip	Code		-
			to be used for future a	innual report notif	icationi	. 2
For furthe	er information c	concerning this matter, please e	all:			DZO JI
Brooke C				_)		UL 27
	Name o	of Person	Area Code	2 Daytime	Telephone Number	230 AH
Enclosed	is a check for t	he following amount:				
□ \$25.0	00 Filing Fee	X \$30.00 Filing Fee & Certificate of Status	Certified Co	ру	Certifica Certified	ling Fee, te of Status & Copy
	Mailing Addres Registration 5				tion	
	Division of C			gistration Sec vision of Corp		
	2.O. Box 632		The	e Centre of Ta	allahassee	1.0
	Fallahassee, I	F1, 04019	241	io ini Monroe	Street, Suite 8	10

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALICIA RAMIREZ CLEANING LLC	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.20000175630}{1.20000175630}$	were filed on June 23, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	Hity Commons "The designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:	3440 50th Pl. Lot 44
(Principal office address MUST BE A STREET ADDRESS)	Vero Beach, FL 32967
Enter new mailing address, if applicable:	<del></del>
(Mailing address MAY BE A POST OFFICE BOX)	7ALL 920 JI
	2
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
	E. F. 2
Name of New Registered Agent:	, τη Ω τη ω
New Registered Office Address:	Enter Florida street address
	Florida

## 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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

. 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
AMBR	Alicia Ramirez	3440 50th Pl. Lot 44 Vero Beach, FL 32967	<b>≣</b> Add
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			🗆 Change
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record specifies a d	lelayed effective date	, but not an effectiv	e time, at 12:01 a.:	m, on the earlier of:	(b) The 90th	day after the
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d is filed.  July 21  ated	LA Sai	ture of a member of a	uthorized representati	ive of a propher		

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