

L20 000 193229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

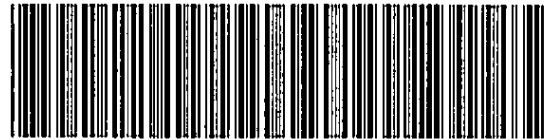
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Received:
08/13

Office Use Only

J.C.
08/13/24



800368854598

07/12/21--01017--028 **30.00

20

07/28/23 A 11:24

11 EN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVE

2021 AUG 13 PM 5:

August 2, 2021

ASHLEYANN OLYPHANT
2767 CHARTRES AVE
MELBOURNE, FL 32935

SUBJECT: ALL KLEAN UP PROPERTY MANAGEMENT, LLC
Ref. Number: L20000193229

We have received your document for ALL KLEAN UP PROPERTY MANAGEMENT, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

Summer Chatham
OPS

Letter Number: 921A00018065

60

2021 AUG 13 AM 11:24

71177

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL KLEAN UP PROPERTY MANAGEMENT

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ASHLEYANN OLYPHANT

Name of Person

Firm/Company

2767 CHARTRES AVE

Address

MELBOURNE/FLORIDA/32935

City/State and Zip Code

ALLKLEANUP@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ASHLEYANN OLYPHANT

321 at ()

258-6285

Name of Person

Area Code

Daytime Telephone 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

FILED
JUL 13 AM 10:24

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

ALL KLEAN UP PROPERTY MANAGEMENT

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

The Articles of Organization for this Limited Liability Company were filed on July 7, 2020. and assigned
Florida document number L20000193229.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

2767 CHARTRES AVE

MELBOURNE FL, 32935

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2767 CHARTRES AVE

MELBOURNE FL, 32935

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City

Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ASHLEYANN OLYPHANT	2767 CHARTRES AVE	<input checked="" type="checkbox"/> Add
		MELBOURNE FL. 32935	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CYNTHIA L JORDAN	1282 RANDY AVE	<input type="checkbox"/> Add
		PALM BAY FL. 32909	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

EMPLOYEE ADDRESS CHANGE: MICHAEL CLOUD JR

2767 CHARTRES AVE

MELBOURNE FL, 32935

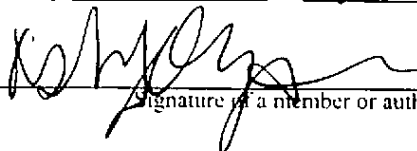
E. Effective date, if other than the date of filing: JULY 8, 2021 **(optional)**

(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.

Dated August 9th 2021



Signature of a member or authorized representative of a member

ASHLEYANN ELIZABETH OLYPHANT

Typed or printed name of signee