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(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:	
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### COVER LETTER

Division of Corporations
SUBJECT: Giavani's Commercial Cleaning Services UC  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:
Ciocanni D. Swith  Name of Person
GILLEUMIS AMMERICAL CHECKING SENVICES (L.
7860 W. Commercial Bud. Suite 200 #577
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Name of Person at (305) 700-0117  Area Code Daytime Telephone Number
closed is a check for the following amount:
1 \$25.00 Filing Fee \$\times \text{ S55.00 Filing Fee & Certificate of Status} \text{ Certified Copy (additional copy is enclosed)} \$\times \text{ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}

**Registration Section** 

TO:

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 ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compa (A Florida Limited)	A CICANING SCYDICCS LLC Any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>LZ</u>	were filed on $69/08/7020$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7860 Commercial Bluch.
(Principal office address MUST BE A STREET ADDRESS)	Lauderhill, FL 33354
Enter new mailing address, if applicable:	7860 Conmercial RTCC.
Mailing address MAY BE A POST OFFICE BOX)	Laucherhill, FL 38351
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
<del></del>	City Zip Code
w Registered Agent's Signature, if changing Registered Agent:	

ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ng filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability npany 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>	Type of Action
MGR	Brittany Mealy	28123 SLO 132nd Ar	PNLERdd
		Homestead, FL 33	☐Remove
			GChange
			□ Add
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fective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to date of the date inserted in this block does not meet the applicable state cument's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time, at 1 is filed.	2:01 a.m. on the earlier of: (b) The 90th day after t
ted 17-29-2020,	>
Signature of a member or authorized rep	rescontative of a mornhor