L2 | 000055028

ı	
1	(Requestor's Name)
Ì	(Address)
	(Address)
	(City/State/Zip/Phone #)
, , ,	PICK-UP WAIT MAIL
•	(Business Entity Name)
	(Document Number)
Certifi	ed Copies Certificates of Status
Spe	cial Instructions to Filing Officer:
-	<u> </u>
	Office Use Only



700359846507

02/16/21--01023--026 *+60.00

7591 FEO 13 PH-1:16

11-1

COVER LETTER

TO: Registration Section

Division of Co	orporations		
Westland	Cleaning Services, LLC.		
SÚBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
lease return all corresp	ondence concerning this matter	to the following:	
I	Sandi Joseph		
		Name of Person	
	Westland Cleaning Service	es, LLC.	
		Firm/Company	
	4203 14TH St West		
		Address	
	Lehigh Acres, FL 33971		
		City/State and Zip Code	
	joseph_sandi21@yahoo.com	n	
	E-mail address: (to be used for future annual report notifica-	ation)
For further information	concerning this matter, please c	all:	
Sandi Joseph		504 777-1038	
Name	of Person	at ()	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 Addr Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S	orations Hahassee
i ananassec.	. 1 15 34317	Tallahaseee Fl 3	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Westland Cleaning Services, LLC. (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 February 01, 2021 and assigned Florida document number _L2000055028 This amendment is submitted to amend the following: A! If amending name, enter the new name of the limited liability company here: Foreis Legacy Investments, LLC. The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 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

II amendi o <u>r remove</u>	ng Authorized Person(s) authoriz <u>d from our records</u> :	zed to manage, <u>enter the title, name, and</u>	address of each person being added
 MGR = AMBR =	Manager Authorized Member		
] <u>Title</u>	Name	Address	Type of Action
			□Add
I			□Remove
i I			Change
			□ Add
i			□Remove
•			□ Change
- i -			□Add
			□Remove
			□Change
1			□Add
ſ			□Remove
		 	Change
	-		DAdd
			Remove
<u> </u>			□ Change
			Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
-	
-	
-	
-	
-	
-	
-	
-	
-	
-	
-	
an eft ote:	tive date, if other than the date of filing:
recor Lis ti	rd 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
ated	February 12 2021 Signature of Amember or authorized representative of a member
	Sandi Joseph
	Typed or printed name of signee

Filing Fee: \$25.00