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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Refresh	Cleaning Services L.L.C.		
Sobole 1.		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Courtney D. Eanes		
		Name of Person	
	Refresh Cleaning Service		
		Firm/Company	
	2942 Denver Ave SE		
		Address	
	Palm Bay, FL 32909		
		City/State and Zip Code	
	courtneyeanes@gmail.com E-mail address: (1 to be used for future annual report notifi	cation)
For further information	concerning this matter, please c	all:	
Courtney D. Eanes		at (<u>321</u>) <u>408-4606</u>	
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)

No.

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

	Cleaning Services L.L.C.		_
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appea Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability C	Company were filed on _	February 26, 2021	and assigned
Florida document number <u>L21000095600</u>	 .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company h	ere:	~
			2023
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the	designation "LLC" or the abb	
Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDI	RESS)		<u>-0</u>
		_	<u> </u>
			ယ္
Enter new mailing address, if applicable:			01
• •			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our	records, <u>enter the name</u>	of the new registere
agent and/or the new registered office address here.			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Fle	orida street address	
		. Florida	
	City		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>	Address	Type of Action
MGR_	Michael D Eanes	2942 Denver Ave SE, Palm Bay, FL 32909	\ X \Add
			□Remove
			□ Change
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			Change

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Note:	e date, if other than the date of filing: tive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
record d is file	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 d.
Dated _	May 7th 2003.
	Signature of a member or authorized representative of a member
	Courtney D Fanes
	Courtney D Eanes Typed or printed name of signee

Filing Fee: \$25.00