

L21 000 116 063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

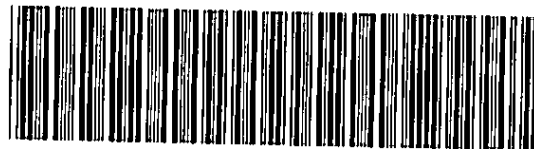
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Received  
08/12

Office Use Only

S.C.  
08/18/21



600369828456

07/12/21--01019--002 \*\$25.00

11/3/21 4:11:24  
F. J. M. N.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

REC-1155

August 2, 2021

2021 AUG 12 AM 10:49

SINDY LEWIS  
5621 ADAIR WAY  
LAKE WORTH, FL 33467

SUBJECT: UNITY CLEANING SERVICES LLC  
Ref. Number: L21000116063

We have received your document for UNITY CLEANING SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ▶ In order to change authorized persons on the entity, you must file an amendment for a Limited Liability Company. Attached is the proper form with instructions for your convenience.

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: 621A00018058

66

2021 AUG 12 AM 11:24

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Unity Cleaning Services LLC  
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:

Sindy Lewis  
Name of Person

Unity Cleaning Services LLC  
Firm Company

5621 Adairway, LAKE  
Address

LAKE worth, FL 33467  
City/State and Zip Code

Sindy Lewis @ Hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sindy Lewis at ( 561 ) 313-8729  
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

Unity Cleaning ~~Corp~~ Services  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Guiselle Fuller	5621 Adair WAY, LAKEWORTH FL 33467	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Sindy Lewis	5621 Adair WAY, LAKEWORTH FL 33467	<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

**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.

90th day after t  
A 11:20

Dated 8-9-2021

Sindy Lewis.  
Signature of a member or authorized representative of a member

Sindy Lewis  
Typed or printed name of signer