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COVER LETTER

Division of Cor	porations			
QUALITY	CLEANING SERVICES OF N	MIAMELLC		
SUBJECT:	Name of Lim	ited Liability Company		
	Name of 12m	шей гласину соправу		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JESSICA JACQUELINE	SMITH		
		Name of Person		
	QUALITY CLEANING S	ERVICES OF MIAMI LI	.C	
		Firm/Company	·	
	14900 SW 30TH STREET	`279183		
		Address	· • · · · · · · · · · · · · · · · · · ·	
	MIRAMAR, FL 33027			
	QUALITYCLEANINGSEI	City/State and Zip Code RVICESMLLC@GMAIL	.СОМ	
	E-mail address: (to be used for future annual	report notification)	 -
For further information c	oncerning this matter, please co	all:		
JESSICA JACQUELINI	E SMITH	305 799	9-7806	
Name o	f Person	at () Area Code	Daytime Telephone No	ımber
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	Cer losed) Cer	00 Filing Fee, tificate of Status & tified Copy itional copy is enclosed)
Mailing Addres		Street Ad		
Registration S	Section	Registra	tion Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section

TO:

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

OUALITY CLEANING SERVICES OF MIAMILLIC

(Name of the Lim	ted Liability Company as it now appears on our reco (A Florida Limited Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited I Florida document number	Liability Company were filed on	and assigned
This amendment is submitted to amend the fol		
A. If amending name, enter the new name of	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	ب ،
Principal office address MUST BE A STRE	ET ADDRESS)	1
		٠ - ٢٥
Enter new mailing address, if applicable:		11: 22
Mailing address MAY BE A POST OFFICE	BOX)	> · · · · · · · · · · · · · · · · · · ·
3. If amending the registered agent and/or	registered office address on our records, ente	er the name of the new regi
ngent and/or the new registered office addre	ess here:	
Name of New Registered Agent:	GAYNOR MONIQUE STEPHENSON	
New Registered Office Address:		
· —	Enter Florida street addr	ess
		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.

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>	Name	Address	Type of Action
MGR	MONIQUE STEPHENSON		
		14900 SW 30TH STREET 279183 MIRAMAR, FL 33027	□Add
		14900 SW SULIT STREET 279105 MIRAMAR, FESSU27	≝ Remove
			Change
MGR	JESSICA JACQUELINE SMITH	(4900) SW 30TH STREET 279183 MIRAMAR, FL 33027	
			⊞∕ √dd
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	on the Department of Sta	ie s records.				
		- Minting time at 12	·01 a.m. on the c	earlier of: (b)	The	90th day after the
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