

L21000173924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

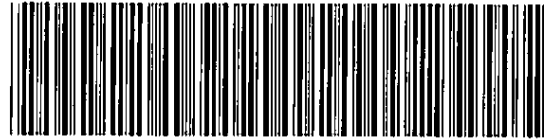
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200367259092

RECEIVED
2021 JUN -1 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2021 JUN -1 AM 10:21
SECRET

1707 0 150

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 6/1/2021

****WALK IN****

ENTITY NAME INFINITY CLEANING SERVICE & MORE, LLC

DOCUMENT NUMBER L21000173924

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

REF ID: A66044

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Acts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION

NUMBER OF CERTIFICATES REQUESTED

TOTAL OWED \$25.00

ACCOUNT #: I20160000072

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INFINITY CLEANING SERVICE & MORE 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:

Julio Alayo
Name of Person

INFINITY CLEANING SERVICE & MORE
Firm/Company

631 STAFFORDSHIRE DR EAST
Address

JACKSONVILLE, FL 32225
City/State and Zip Code

INFINITY.CLEANING.SERVICE@OUTLOOK.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julio Alayo at (805) 798-7705
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 2, 2021

SUNSHINE STATE

CORRECTED
Please Allow For
Same File Date

SUBJECT: INFINITY CLEANING SERVICE & MORE LLC
Ref. Number: L21000173924

We have received your document for INFINITY CLEANING SERVICE & MORE LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

There is nothing to change on section A (new business name). If you are not changing the business name please delete the section A.

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.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 021A00011870

RECEIVED
2021 JUN -2 PM 3:25
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

INFINITY CLEANING SERVICE & MORE 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 _____ and assigned
Florida document number L21000173924.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

City

Florida

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:

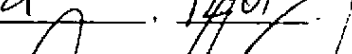
MGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------------|--------------------------|--|
| MGR | JULIO AYANO | 1031 STAFFORDSHIRE DR. E | <input checked="" type="checkbox"/> Add |
| | | JACKSONVILLE, FL 32225 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | CHARLESA CARBAJAL | 309 CANDLEBARK DR | <input type="checkbox"/> Add |
| | | JACKSONVILLE, FL 32225 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

(If an effective 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 605.0207 (3)(b)

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.

05/26/21 12:01

 Signature of authorized representative of a member
 Juno Araya
 Typed or printed name of signer

Filing Fee: \$25.00