## 121000254443

(Requestor's Name)
(Address)
(Address)
( ladicas)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(======,
Cartificat Canica Cartificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>

Office Use Only



500368245925

96/21/21--01036--007 \*\*25.00

7/19/2.

## **COVER LETTER**

• •

P.O. Box 6327

Tallahassee, FL 32314

TO:

TO: Registration Sec Division of Corp			
SUBJECT: ( 4 )	Commercial Name of Lim	4 ROSIDENTIAL CL	Daning LLC
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Cassy R	idguay_ Name of Person	
	Can Commu	Lrciala Resident	ial Cleaning, LLC
	_2830 Tara	Lakes Circle	
	North For	+ MULKS, FL 339 City/Stake and Zip Code	217
	A =	Lan a amail. Con	Cation)
For further information co	oncerning this matter, please ca	all:	
Cassy Ric	Iguay Roson	at ( <u>219</u> ) <u>210</u> – Area Code Daytime	Telephone Number
Enclosed is a check for th	e 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 S	Section	Street Address: Registration Sec	
Division of Co	orporations	Division of Corp	סווטווס

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited Liability Compan (A Florida Limited Li	Residential Cleaning, IIC y as it now appears on our records.)  ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number $\underline{L2100254443}$ .	were filed on $6 - 1 - 2021$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)	2830 Tara Lakes Circle North Fort Myers FL. 33917
Enter new mailing address, if applicable:	2830 Tara Lakes circle
(Mailing address MAY BE A POST OFFICE BOX)	North Fort Myers FL, 33917
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, enter the name of the new registere
Name of New Registered Agent: 0.55	y Ridgway
New Registered Office Address: 28.30	Tara Lakt Circle Enter Florida street address
North	FORT MYRYS, Florida 33917
New Registered Agent's Signature, if changing Registered Agent:	سي

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 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
RA	Inc Authority	390 North Orange Ave	
	O	390 North Orange Ave Ste 2300 Orlando, Fl 328	SO ERemove
			□Change
			□Add
			□Remove
			Change
	<del></del>		🗆 Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	Change
		<del></del>	🗆 Add
			□Remove
			□Change
	<del></del>		🗀 Add
			□Remove
		<del></del>	Change
			🗆 Add
			□Remove
			□ Change

	l Car	Dy Ri	dqwc	u0	m +	he o	wner	- OF	
_(	40 R	usiden	tial	4 CC	mmer	من	Clear	ing,	UC.
	lam	need	ing	to	remou	e I	NC	<del>J</del> utho	city
_		om ou	mecsi	ůp_	d m	y bi	win		
	and t	nante	sit	<u> 1000</u> C	احر 0	<u>Cas</u>	J. F	Pidque.	ay
									<u> </u>
					,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			<del></del> .	
							<del></del>	·	<u>-</u>
				<del></del>					<del></del>
	<del></del>				<del></del>	-			
						<del></del>			
									<u>.</u>
				· · · · · · · · · · · · · · · · · · ·					···
						·			
									·
		than the date			7-200	9 or more than	`•	rional) er filing.) Pursu	ant to 605 020
ote: If	the date inserte	d in this block of the Oepart	does not me	et the applica					
ecord s	•	red effective dat	e, but not ai	i effective ti	me, at 12:01	a.m. on the	earlier of: (	b) The 90th	day after the
		0.004							
ited	10-11-	9091	,		<del></del> •				
		^		$\bigcirc$ $\bigcirc$	_				
		$-(, \sigma_i$	ature of a me	KIDA	rized represen				