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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	Merce d.	es Cleaning	LLC
	Name of Lim	ited Liability Company	,
The enclosed Articles of Am	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	M Men	ercedes Peño Name of Person Cedes Clear Firm/Company	ning LLC 17. 5
		Firm/Company H2nd St SW Address	•
_	Naple	City/State and Zip Code 2des 092483 to be used for future annual report not	6
For further information conc			illication)
Mercede Name of Pe		at(413)_36	2-6822 ne Telephone Number
Enclosed is a check for the f	ollowing 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 Sec Division of Corp P.O. Box 6327 Tallahassee, FL	porations	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Fallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mercedes C	leaning 1 LC
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company with Florida document number	vere filed onUn. 9th ZO Zland 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 Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3018 42nd St SW
(Principal office address MUST BE A STREET ADDRESS)	Naples FL 34186
Enter new mailing address, if applicable:	0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, enter the name of the new registered
	edes Peña
_	42nd St SW Haples PL34 Enter Florida street address
	Japles , Florida 34116 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.

Mendes PeveIf 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
AMBR	Mercedes Peña	3018 42nd St SW Naples, A	34116 1_ 1⊻Add
		FL 34116	
			□Change
			□ Remove
			,
			⊟Rémove
			<u></u> □Change
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ective date, if other than the date of filing:	ptional) after filing) Pursuant to 605.0
te: If the date inserted in this block does not meet the applicable statutory filing requirements,	this date will not be listed
sument's effective date on the Department of State's records.	
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	f: (b) The 90th day after t
s filed.	
ed 6/14/21	
—··· /· /	
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Meades Peva Signature of a member or authorized representative of a member	