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Special Instructions to Filing Officer:





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## COVER LETTER

Division of Corp	orations		
SUBJECT: AT	S Cleaning of Name of Timite	and Maintenance ed Liability Company	LLC
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	dence concerning this matter to	the following:	
	ale	xandra Staub Name of Person	,
	ATS Cleanin	g and Maintenance Firm/Company	LLC
	40 Rymer	Ln . Address	
	Palm Coo	ast, FL 32164 City/State and Zip Code	
	E-mail address: (to	be used for future annual report notification	
For further information cor	ncerning this matter, please call	1:	
Travis Name of I	Staub	at ( <u>3 % し</u> ) <u>503-23</u> Area Code Daytime Telep	98 shone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee.  Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

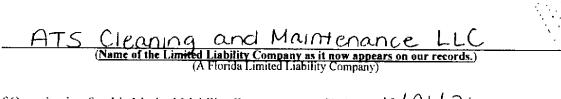
Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



The Articles of Organization for this Limited Liability	y Company were filed on <u>U/21/</u> 2	and assigned
Florida document number <u>La 1000 26 558</u>	•	
This amendment is submitted to amend the following:		
•		
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I.	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 ADD	DRESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or register	red office address on our records, <u>enter</u>	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	<u> </u>
		orida
	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.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
<u>AMB</u> R	akxondra Staub	40 Rymer Ln.	🗀 Add
		40 Rymer Ln. Palm Coast, FL 32164	□Remove
			XChange
<del></del>			□Add
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