# L21000408246

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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A. RIVERS
DEC - 7 2021



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### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 22, 2021

ZOFIA A BRIGNONI 7429 AZALEA COVE CIRCLE ORLANDO, FL 32807

SUBJECT: BRIGNONI EZ CLEAN MAID SERVICES LLC

Ref. Number: L21000408246

We have received your document for BRIGNONI EZ CLEAN MAID SERVICES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 621A00025745

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
	SI EZ CLEAN MAID SERVICI	ES LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ZOFIA A BRIGNONI		
		Name of Person	
	<u>.</u>	Firm/Company	
	7429 AZALEA COVE CII	RCLE	
	ORLANDO, FL 32807	Address	
	Zofica E-mail address: (	City/State and Zip Code  740 Ma(1 CM) to be used foresture annual report note	fication)
For further information (	concerning this matter, please co		
ZOFIA A BRIGNONI		ut (487) 260	1 -6788
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee     S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 633	27	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### BRIGNONI EZ CLEAN MAID SERVICES 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 Con	npany were filed on 09/15/2021	and assigned
Florida document number L21000408246		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	H.iability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	SS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		3.120
B. If amending the registered agent and/or registered of	ffice address on our records, <u>enter th</u>	e name of the new registered
agent and/or the new registered office address here:		<b>Go</b>
AL CALIBOR AND A		AH 8
Name of New Registered Agent:		AH 8:
New Registered Office Address:	<del></del>	8: <b>56</b>
	Enter Florida street address	m -
	, Flor	ida
	•	Zift Confe
New Registered Agent's Signature, if changing Registered A	<u>.gent:</u>	

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	ARROYO, JOSEPH, MR	7429 AZALEA COVE CIRCLE	□Add
		ORLANDO, FL 32807	≅Remove
			□Change
MGRM	GRM BERRIOS, DIANA P, MRS	7429 AZALEA COVE CIRCLE	□Add
		ORLANDO, FL 32807	■Remove
			☐ Change
AMBR	BRIGNONI, ZOFIA A	7429 AZALEA COVE CIRCLE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		ORLANDO, FL 32807	□Remove
			□Change
			□Add
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m effective date is ote: If the date i	other than the date of listed, the date must be specil inserted in this block does ive date on the Departmen	fic and cannot be pric not meet the appli	or to date of filing or me icable statutory filing	ore than 90 days after fi	ling.) Pursuant to 605.0207
ecord specifies a is filed.	i delayed effective date, bi	at not an effective	time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
ned <u>OCtol</u>	ber 4th	201	11.		
	2	Mh D	$\mathcal{W}$		
	Signature	of a member of aut	norized representative	of a member	

Filing Fee: \$25.00