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(Requestor's Name)
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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
ACG Clea	ning Service LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Roosevelt Guerrier		
	ACG Cleaning Service	Name of Person	
		Firm/Company	
	2230 Madison St. Apt 15	i iniz company	
	Hollywood, FL 33020	Address	2001
	management@acgclcaning	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	
For further information of	concerning this matter, please c	all:	ज 9
Yves Guerrier		754 221-7147	. 44.7
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Set Division of Control The Centre of 2415 N. Monro Tallahassee, Florida Properties of Street Address.	rporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

nany as it now appears on our Liability Company)	records,)	
y were filed on02-03-202	22 and assigned	
bility company here:		
oility Company," the designation	on "LLC" or the abbreviation "L.L.C."	
N/A		
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N/A	: >	
	(.7)	
address on our records,	, enter the name of the new regi	
Enter Florida stree	et address	
Exuer Florida Street dadress		
City	, Florida Zip Code	
	bility company here: bility Company." the designation N/A N/A	

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Yves Guerrier	151 N Nobhill Rd. Ste 367	
		Plantation, FL 33324	
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Yves Guerrier 50%		
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ective date, if other than the da	12/16/2022	(optional)
effective date is listed, the date must be	specific and cannot be prior to date of fi	filing or more than 90 days after filing.) Pursuant to 60
e: If the date inserted in this block ument's effective date on the Department	: does not meet the applicable statut irtment of State's records.	tory filing requirements, this date will not be list
cord specifies a delayed effective d s filed.	ate, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 90th day aft
December 16	2022	
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Typed or printed name of signee