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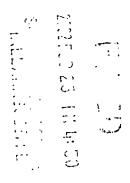
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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor							
SUBJECT: UL	TRA _	CLEAN	NB S	SERVICES Company	LLC		
		Name of Limit	ed Liability (Company			
The enclosed Articles of	Amendment a	nd fee(s) are subn	nitted for fil	ing.			
Please return all correspo	ndence concer	ning this matter t	o the follow	ing:			
	_ De	wid (Name	of Person			
	uil	RA Clea	an ing Firm/(Services	LLC	<u></u>	
	18 3	0 N. L	vs VIII	dress D	R. #7	21	
	Plan	itation	FL City/State	333 22 and Zip Code		_	
	<u>u</u>	TRASOFL	o @ 9	future annual report r	notification)	-	
For further information of	oncerning this	matter, please ca	all:			(O -)	. 1
David G	resid 600	unus	at (954) 513	3 0486	er 7	
Name (or rerson		A	rea code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[] []
Enclosed is a check for t	he following a	mount:				17 - 5	
\$25.00 Filing Fee		Filing Fee & icate of Status	Certi	0 Filing Fee & fied Copy is enclosed)	Certifi Certifi	Filing Feel cate of Status & ed Copy nal copy is enclosed)	CO
<u>Mailing Addre</u> Registration				Street Address Registration			
Division of (Corporation:	5		Division of (
P.O. Box 63 Tallahassee.					nroe Street. Suite	810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UIFRA CLEANING 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 Liabilit Florida document number <u>L 2 2 0 0 0 0 3 8 2</u>	
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7400 NW 17th St
(Principal office address MUST BE A STREET AD	0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1830 N. University DR. # 721 Plantation FL 33322
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, enter the name of the new registered
Name of New Registered Agent:	David Gouldbourne
New Registered Office Address:	1830 No university Dr 1 # 721 Enter Florida street address
	Plantation Florida 33322 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 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
MGR	David Gouldbourne	1830 D. aniversity or #7	/2/ □Add
		Plantation FL 33322	□Remove
			lDChange
MGR	Lawanda Ridley - Tu	(Ker	_ ŒAdd
		1830 N. University DR	721 □Remove
		Plantation FL 33322	□Change
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Filing Fee: \$25.00