

h22000071433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

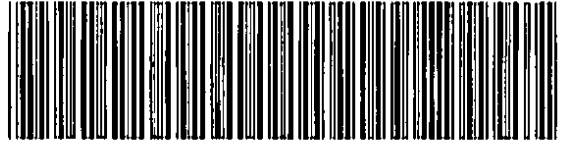
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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SEP 01 2022

R. HUNT

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rivera Home Cleaning Services LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Josiah Jones
Name of Person
Rivera Home Cleaning Services LLC
Firm/Company
3545 Greenfield Ave.
Address
Orlando, FL 32808
City/State and Zip Code
riverahomecleaningservices@gmail.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Josiah Jones 407 725-2501
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|--|---|

Mailing Address:

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**

Rivera Home 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 Liability Company were filed on 02/11/2022 and assigned
Florida document number L22000071433.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Rivera Home Cleaning Services LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

3545 Greenfield Ave

Orlando, FL 32808

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3545 Greenfield Ave

Orlando, FL 32808

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Josiah Jones

New Registered Office Address:

3545 Greenfield Ave

Enter Florida street address

Orlando

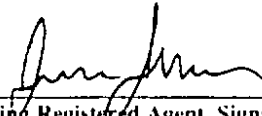
City

Florida 32808

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

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DIVISION OF CORPORATE REGISTRATION
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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>	<u>Address</u>	<u>Type of Action</u>
MGR	Josiah Jones	3545 Greenfield Ave	<input checked="" type="checkbox"/> Add
		Orlando, FL 32808	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alejandra Rivera Rivera	3545 Greenfield Ave	<input type="checkbox"/> Add
		Orlando, FL 32808	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 DIVISION OF CORPORATE & FINANCIAL SERVICES
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FIELD
BUREAU OF STATE
DIVISION OF CONSPIRACIES

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 26th 2022

Alexandra Rivera Rivera

Signature of a member or authorized representative of a member

Alejandra Rivera Rivera

Typed or printed name of signee

Filing Fee: \$25.00