## K22000102416

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	of Status
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T. MATTHEWS
JUN 20 2022

## **COVER LETTER**

Registration Section

TO:

Division of Cor	porations	•	
MSD DIAM	MOND CLEANING LADIES	LLC	
SUBJECT:	Name of Lim	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	SISSI DOCAMPO AGUII	LA	
		Name of Person	
	MSD DIAMOND CLEAN	VING LADIES LLC	
	<del></del>	Firm/Company	<del></del>
	5611 NW 24TH AVE		
		Address	
	MIAMI, FLORIDA - 3314	42	
		City/State and Zip Code	<del></del>
	SISSI881210@HOTMAIL		
		to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co	all:	
SISSI DOCAMPO		754 267-4651	
Name o	Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassec, FL	oorations allahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO FILED ARTICLES OF ORGANIZATION SECRETARY OF STATE OF

22 APR 29 PH 3: 03

## MSD DIAMOND CLEANING LADIES 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 L		filed on 02/28/2022	and assigned
Florida document number L22000102416	<del></del> .		
This amendment is submitted to amend the foll	lowing:		
A. If amending name, enter the new name of	of the limited liability c	ompany here:	
The new name must be distinguishable and contain the v	words "Limited Liability Cor	mpany," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)  B. If amending the registered agent and/or the new registered office address	registered office addre		e name of the new registered
Name of New Registered Agent:	SISSI DOCAMPO		
New Registered Office Address:	5611 NW 24AVE		
		Enter Florida street address	
	MIAMI	Flori	da 33142 Zip Code
	C	"V	Lip Com

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 Agenty 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>	Name	Address	Type of Action
P	SISSI DOCAMPO	5611 NW 24TH AVE	
		MIAMI, FLORIDA - 33142	□R.cmove
		<del></del>	
S	MABEL DOCAMPO	5611 NW 24TH AVE	□Add
		MIAMI, FLORIDA - 33142	□ Remove
		<del></del>	■Change
		□Add	
			□ Remove
		<del></del>	☐ Change
			□Add
		Remove	
		Change	
		□Add	
			□Remove
		□Add	
			□Remove
			□ Change

	MABEL DOCAMPO AS SECRETARY OF MSD DIAMOND CLEANING LADIES LLC.
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lf an cfl <u>Note:</u>	(optional)  [Continual]  [Conti
e recor rd is fi	d 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 led.
	APRIL 11TH 2022
Dated	
Dated	Signature of a member of atthorized representative of a member
Dated	Signature of a member of authorized representative of a member  MABEL DOCAMPO

Filing Fee: \$25.00