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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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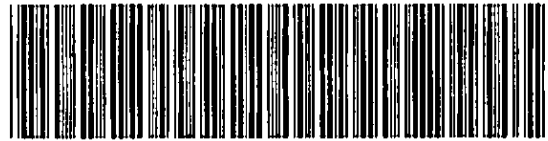
(Business Entity Name)

(Document Number)

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U.S. Department of Justice

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 MAY -9 PM 3:00

T. MATTHEWS

JUN 30 2022

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Clean with Rosa 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:

Margarita Rosa  
Name of Person

Clean with Rosa  
Firm/Company

615 N Broadway Unit E Lantana FL  
Address

Lantana, FL, 33462  
City/State and Zip Code

mrosapereq12@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Margarita Rosa at ( 561 ) 388 7838  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Clean with Rosa Services 22 MAY - 9 PM 3:00

(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 03/11/2022 and assigned Florida document number L22000123697

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:

(Principal office address MUST BE A STREET ADDRESS)

615 n broadway unit  
E lantana FL 33462

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

615 n broadway unit  
E lantana FL 33462

**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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_

City

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>	<u>Address</u>	<u>Type of Action</u>
MGRm	Perea Buenanos Margarita Rosa	615 N Broadway Unit E Lantana FL 33462	<input checked="" type="checkbox"/> Add 33462
MGRm	perea Buenanos, margarita Rose	615 N Broadway Apt E lantana, FL 33462	<input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change
MGRm	perea Buenanos margarita Rosa	615 N Broadway Apt E lantana FL 33462	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change
MGRm	Perea Buenanos margarita Rose	615 N Broadway Apt E lantana, FL 33462	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change
MGRm	perea Buenanos margarita Rose	615 N Broadway, E lantana, FL 33462	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change
MGRm	Perea Buenanos margarita Rosa	615 n Broadway lantana, FL 33462	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change
MGRm	perea Buenanos margarita Rosa	615 n Broadway lantana, FL 33462	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change
MGRm	perea Buenanos margarita Rosa	615 N Broadway, E lantana, FL 33462	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove  <input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

EIN Assigned 88-1454748

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

*(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)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Dated \_\_\_\_\_

*Marganta Rosa*

Signature of a member or authorized representative of a member

Marganta Rosa

Typed or printed name of signee