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## **COVER LETTER**

JEAN'S QUALITY CLEANING SERVICES LLC SUBJECT: 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: Jean Elie Desima Name of Person Firm/Company 14899 NE 18th Ave. APT 2R Address North Miami, Florida 33181 City/State and Zip Code Bookkeeping638@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jean Elie Desima 985-3404 Name of Person Daytime Telephone Number Area Code Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$25.00 Filing Fee **\$60.00** Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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

The Articles of Organization for this Limited Liability Company were filed on March 23, 2022 and assigned Florida document number L22000142698

This amendment is submitted to amend the following:

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

JEAN S QUALITY 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

## New Registered Agent's Signature, if changing Registered Agent:

agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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Filing Fee: \$25.00