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## **COVER LETTER**

TO: Registration So Division of Cor			
Boca Rator	Cleaning Services, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tanira M. Dorneles		
		Name of Person	<del></del>
	Boca Raton Cleaning Serv	ices, LLC	
		Firm/Company	
	5350 NE 5TH Terrace		
		Address	
	Deerfield, Beach, FL 3306		
	taniradorneles@hotmail.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	fication)
For further information of	concerning this matter, please c	all:	
Tanira M. Dorneles		561 3253289	
Name o	of Person	at () Area Code Daytimo	e Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	ction
Division of C		Division of Cor	

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

BOCA RATON CLEANING SERVICES, LLC

FILED 2022 JUN - 7 PM 1: 43

	iability Company as it now appears on our records $SF_{t+1}$
(A I	Jability Company as it now appears on our records. BEURE TARY OF STATE  (N4/25/2022
	04/25/2022 THASSEE, FL
The Articles of Organization for this Limited Liabi	
Florida document number	
This amendment is submitted to amend the followi	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the word:	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:
(Principal office address MUST BE A STREET 2	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
(Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or regi	stered office address on our records, enter the name of the new regist
(Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or regi	stered office address on our records, enter the name of the new regist
(Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or regi	stered office address on our records, enter the name of the new regist
(Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or reginagent and/or the new registered office address h	stered office address on our records, enter the name of the new regist
(Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or reginagent and/or the new registered office address h	stered office address on our records, <u>enter the name of the new regist</u> ere:
(Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or registered affice address has been been made of New Registered Agent:	stered office address on our records, enter the name of the new regist
agent and/or the new registered office address h  Name of New Registered Agent:	stered office address on our records, <u>enter the name of the new regist</u> ere:

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 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>	Type of Action
MGR	Tanira M. Dorneles	5350 NE 5th Terrace, Deerfield Beach, FL 33064	
			<b>=</b> Add
			Remove
		<del></del>	□Change
MGR	Marcelo A. Oliveira	4308 Blowing Point Pl, Jupiter, Fl, 33458	
			□Remove
			□Сһапде
		<del></del>	□Add
			□Remove
		- <del></del>	□Change
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