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COVER LETTER

Henvil Cor SUBJECT:	nmercial Cleaning LLC		•	
30B3ECT	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Benito M. Henriquez			
		Name of Person		
	Henvil Global Enterprises	Согр		
		Firm/Company	. .	
	869 NW 84TH LN			
		Address		
	Coral Springs, FL 33071			
		City/State and Zip Code		
	benito.henriquez@henvil.com			
	E-mail address: (to be used for future annual report notificat	non)	
For further information of	concerning this matter, please co	all:		
Benito Henriquez		786 246-5526 at ()		
Name o	of Person	Area Code Daytime Te	elephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ S30.00 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)	

TO:

Registration Section Division of Corporations

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

Henvil Commercial Cleaning LLC			
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it no rida Limited Liability C	ow appears on our records.) ompany)	
The Articles of Organization for this Limited Liability	y Company were file	ed on 06/01/2022	and assigned
Florida document number L22000251052			
This amendment is submitted to amend the following			
a. If amending name, enter the new name of the l	imited liability com	pany here:	
- Henvil Global Commercial Cleaning LLC			
he new name must be distinguishable and contain the words "I	Limited Liability Compa	ny," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET AD	DRESS)		
· · · · · · · · · · · · · · · · · · ·			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or registengent and/or the new registered office address her		on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:			
New Registered Office Address:			
The Winds of the Chamess.	-	Enter Florida street address	
		. Florie	da
	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

Title	<u>Name</u>	Address	Type of Action
MGR	Benito M. Henriquez	869 NW 84TH LN, CORAL SPRINGS, FL 33071	= Add
			□Remove
			□Change
MGR	Gracilda Henriquez	869 NW 84TH LN. CORAL SPRINGS, FL 33071	= Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
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