

L22000284400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

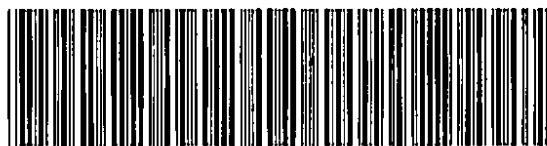
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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22 SEP 15 PM 2:18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOLDEN SHINE CLEANING SERVICE 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:

YON, VIOLET
Name of Person
GOLDEN SHINE CLEANING SERVICE LLC
Firm/Company
4300 18th ST W
Address
Bradenton, FL, 34205
City/State and Zip Code
CINDERELLACLEANING2022@gmail.com
E-mail address: (to be used for future annual report notification)

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RECEIVED
DIVISION OF CORPORATIONS
SEP 22 2015

For further information concerning this matter, please call:

Yon,Violet
Name of Person
1(424) 356-2274
at ()
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

GOLDEN SHINE CLEANING SERVICE 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 Liability Company were filed on 06/23/2022 and assigned
Florida document number L22000284400.

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)

4300 18th ST W, # K-304

Bradenton, FL, 34205

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Florida Department of
State

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4300 18th ST W, # K-304

Bradenton, FL, 34205

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:

4300 18th ST W, # K-304

Enter Florida street address

Bradenton

City

Florida

34205

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Yon, Violet	4300 18th ST W, # K-304, Bradenton, FL, 34205	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Yon, Violet	4300 18th ST W, # K-304, Bradenton, FL, 34205	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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OFFICE OF THE
CLERK OF THE
SOUTH FLORIDA
COURTS

22 SEP 15 PM 2:19

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

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.

Dated 9/1, 2022.

Signature of a member or authorized representative of a member

Typed or printed name of signee