

# Florida Department of State

## Division of Corporations

### Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383 ✓

From:

Account Name : HELEN ACCOUNTING SERVICES, INC  
Account Number : 120120000052  
Phone : (305)591-9180  
Fax Number : (305)591-9167

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@helenaccounting.com

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

### AZAHARA JANITORIAL CLEANING SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2022 AUG 17 PM 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 AUG 17 PM 4:31

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AND  
FILED

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AUG 18 2022

K. Brumby

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

AZAHARA JANITORIAL CLEANING SERVICES, 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 07/08/2022 and assigned  
Florida document number 1.22000306083.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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

City

Florida

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

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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>
X	ZURITA DIAZ, YUSLEN	3627 NW 17TH ST	<input type="checkbox"/> Add
		MIAMI, FL 33125	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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

Signature of a member or authorized representative of a member

Typed or printed name of signee

Aug 17 2022 12:01PM Jelen Accounting