L22000320122

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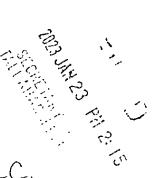


COVER LETTER

TO: Registration Section Division of Corporation			
SUBJECT: Milly	in Clean	ina Services L	10
SUBJECT: 1 111	Name of Lim	ited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
	ence concerning this matter	-	
ricase return air correspond	ence concerning this matter	to the following:	
	Migdalia	Ramos Name of Person	
		Firm/Company	
	1313 Rould	er Dr. Apt B. Address	
	<u> Hissimmer</u>	Florida 347 City/State and Zip Code	744
	millyncleanic E-mail address: (1	USERVICES Q Q MAIL CO	cation)
For further information cond	cerning this matter, please ea	all:	
Migdalia Pr Name of Po	amos erson	at (407) 289- Area Code Daytime	7270 Telephone Number
Enclosed is a check for the t	ollowing 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)
مار.			
Mailing Address: Registration Sec	tion	Street Address: Registration Sect	tion
Division of Cor		Division of Corp	
P.O. Box 6327		The Centre of Ta	
Tallahassee, FL	32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(B)

Millyh'S Cleanin (Name of the Limited Liability Compa (A Florida Limited I	Q Services LLC.
(A Florida Limited I	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2200032072</u> 2	were filed on 7 19 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab Clahing Service The new name must be distinguishable and contain the words "Limited Liabil	SLIC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1313 Boulder Dr. Apt B. Hissimmer, Florida, 34744
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1313 Boulder Dr. Apt.B. Kissimmee, Florida, 34744
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: Migde	ilia Ramos
New Registered Office Address: 1313 Bc	Enter Florida street address
<u> Kissim</u>	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
HUBIZ	Migdalia Ramas	1313 Boulder Dr. Apt. B.	XAdd
		Kissimmee, Florida, 34	144□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			🗆 Add
			□ Remove
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			□Add
			□Remove
			□Change

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(If an of Note:	ive date, if other than the date of filing:
ne recor ord is fi	d 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 led.
	To
Dated	<u> </u>
Dated	M. Dance
Dated	January 16th 2023. M. Raure Signature of a member or authorized representative of a member

Filing Fee: \$25.00