From: RUBEM SOUZA



2022-10-26 19 32.58 GMT

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068

Phone : (407)326-8484

Fax Number : (407)604-6519

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Contact@medeirossouza.com

를 Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BAY ASIDE CLEANING LLC**

Certificate of Status	1
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Corporate Filing Menu

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T. LEMIEUX

OCT 2 6 2022

COVER LETTER

TO: Registration So Division of Cor				
BAY ASIE SUBJECT:	E CLEANING LLC			
	Name of Limi	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:		
	Rubem Souza			
		Name of Person		
	Medeiros Souza corp			
Firm/Company				
845 M GARLAND AVE, STE 100				
		Address		
	ORLANDO, FL 32801			
		City/State and Zip Code		
	contact@inedeirossouza.coi	n to be used for future annual report notif	fication)	
For further information of	concerning this matter, please co		,	
Rubem Souza		407 326 - 8484		
Name (of Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a check for t	he following amount:			
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	[] \$55.00 Filing Fee & Certified Copy (additional copy (senclosed)	 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) 	

MailingAddress:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

From: RUBEM SOUZA

Page: 5 of ?

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New Registered Office Address:	Enter F Orlando	Florida street address Florid	la <u>32801</u>		
New Registered Office Address:	Enter P	lorula street address			
			 .		
	845 N Garland Ave STE 100		•		
Name of New Registered Agent:	Medeiros Souza Corp		<u> </u>	 	
agent and/or the new registered office addr	ess nere:		<u>-</u> ,	⊐ <u>r</u>	
B. If amending the registered agent and/or	registered office address on our	r records, <u>enter the</u>	<u>name of t</u>		regist
			•	25	=
				8	
(Mailing address MAY BE A POST <u>OFFIC</u>	S BOX)		<u>-</u>	022	
Enter new mailing address, if applicable:					
Frincipal office address 61031 BE A STRE					
Principal office address MUST BE A STRE				_	
Enter new principal offices address, if appli					
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or	the abbreviat	ion "L.L.	.C."
Bayside Cleaning LLC					
A. If amending name, enter the new name	of the limited liability company	here:			
This amendment is submitted to amend the fol	Howing:				
Florida document number	·				
The Articles of Organization for this Limited I	Liability Company were filed on _	09/27/2022	aı	ndassig	gned
	ited Liability Company as it now appe (A Florida Limited Liability Company	.)			

New Registered Agent's Signature, if changing Registered Agent:

18 4 8 6 4 COUNTY ON THE STREET STATE

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.



From: RUBEM SOUZA

To: Page:

Hamending 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
			□Add
			Remove
			□ Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
<u>-</u>			□Add
		<u> </u>	□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change

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Effective date, if other than the an effective date is listed, the date inserted in this document's effective date on the	s block does not n	neet the applica	o date of filing or ble statutory fil	more than 90 days ing requirements	optional) after filing.) Pursua s, this date will no	nt to 605.0207 t be listed as
e record specifies a delayed effe rd is filed	ctive date, but not	an effective tin	ne, at 12:01 a m	on the earlier of	of (b) The 90th i	day after the
Dated Orlando		10/26/2022				
_ -						