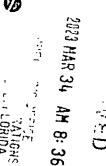
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations			
SUBJECT:	CITYB CL	EANTNG SERVICES LLC			
SUBJECT.		Name of Lir	nited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return	all correspo	ndence concerning this matter	r to the following:		
		KAZ GECIONIS			
			Name of Person		
		CITYB CLEANING SER	VICES LLC		
			Firm/Company		
		1718 SW 34 STREET			
			Address		
		CAPE CORAL FL 33914			
			City/State and Zip Code		
		xezz13@gmail.com			
			to be used for future annual r	eport notification)	
For further in:	formation co	ncerning this matter, please c	all:		
KAZ GECIO	NIS		at t	-9136	
	Name of	Person	Area Code	Daytime Teleph	one Number
Enclosed is a	check for the	: following amount:			
≘ \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divi P.O.	stration Session of Co Box 6327 hassee, FI	ection porations	Division The Cent 2415 N. 1	iress: tion Section of Corporation tre of Tallahas Monroe Stree sec, FL 32303	ssee t, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CITYB CLEANING SERVICES LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L23000024751	were filed on 01/11/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbrev	,—
Enter new principal offices address, if applicable:	- <u> </u>	023 1
(Principal office address MUST BE A STREET ADDRESS)		PP T
	<u>>^.</u>	3 1
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		0
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	eddress on our records, enter the name of	the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street uddress	
	, Florida	
Now Decisional Assets Civ. Ass. 18 1 P. 18 1	City Z	ip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete procept the obligations of my position as registered agent as propering filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am famil rovided for in Chapter 605, F.S. Or, if th	liar with and is document is

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
AMBR	NADIA SOLOMACHA	1718 SW 34 ST. CAPE CORAL FL 33914	= Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Remove
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			□ Remove
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Sote: If the	te, if other than the late is listed, the date me date inserted in this l ffective date on the i	ust be specific and block does not it	cannot be prior to seet the applicab	date of filing or mor le statutory filing	e than 90 days after fi requirements, this	n al) ling.) Pursuant to 605.020 late will not be listed a
record spec l is filed.	fies a delayed effecti	ive date, but not	an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
ated MAR	CH 17		2023			
<u> </u>	\bigcirc	X1179	1			
		Signature of a m	ember or authoriz	ed representative of		

Filing Fee: \$25.00