## L23000400452

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
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(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	i





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A. PARISHANI OCT 0 1 2023

Tallahassee, FL 32314

TO: Registration So Division of Cor			* *	
	LEANING SERVICES, LLC		**	
SUBJECT:	Name of Lim	ited Liability Company		2023
				2023 SED 19
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		MHH: 1,7
	LILIANA SINTI			: L; 7
		Name of Person		
	MARLY CLEANING SEI	RVICES, LLC		
		Firm/Company		
	10960 BEACH BLVD LC	OT 512		
		Address		
	JACKSONVILLE, FL 322	46		
		City/State and Zip Code		
	lsinti77@hotmail.com			
	E-mail address: (	to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please co	all:		
LILIANA SINTI		904 at() 520-	1421	
Name o	f Person	Area Code Daytime	1 4 2 1 e Telephone Number	
Enclosed is a check for the	ne following amount:			
	-	Eless on the contract	G 5/0 00 PH - F -	
■ \$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 enclo	
Mailing Addres Registration S	<del>_</del>	Street Address:	vion	
Division of C		Registration Sec Division of Cor		
P.O. Box 632		The Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023
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MARLY CLEANING SERVICES, LLC

(Name of the Limited Liability Company as it now appears on

(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  $\frac{08/25/2023}{}$ and assigned Florida document number L23000400452 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 "LLC." 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 lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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
VPRES	MARTHA E ROMERO	10960 BEACH BLVD LOT 30	□Add
		JACKSONVILLE, FL 32246	Remove
			□Change
	<del></del>	□Add 023 CRemove	
		□Change □Change □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
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	(optional) or to date of filing or more than 90 days after filing.) Pursuant to 605.0207 cable statutory filing requirements, this date will not be listed as s.
reord specifies a delayed effective date, but not an effective t s filed.	time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
SEPTEMBER 11 2023	
Liliana Sil	norized representative of a member

Filing Fee: \$25.00