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Office Use Only



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## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

SUBJECT:	Rosedale	Pool Name of Limit	L Cleaning ed Liability Company	Service.	s LLC
The enclosed Ari	ticles of Amendment and	fee(s) are subm	nitted for filing		
	correspondence concernir				
	•				
		ل	in Yao		
		0 .	Name of Person		
	Rose	edale p	Pool & Cleaning Firm/Company	3 Servic	es UC
	84	-29 W	oburn CT Address		
	Wine	lermere	Address  FL, 34  City/State and Zip Code  Ohotmail. Co	786	
			City/State and Zip Code	_	
		mail address: (to	be used for future annual re	port notification)	
For further infor	mation concerning this m	atter, please cal	II:		-
Jir	Name of Person		at ( <u>407</u> ) 6	19988	3 nne Number
	Name of Ferson			o ay time Telephie	
Enclosed is a che	eck for the following amo	unt;			
\$25.00 Filin	g Fee	ing Fee & e of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisi P.O. B	2 Address: tration Section on of Corporations Box 6327 tassee, FL 32314		Division The Cent 2415 N.	dress: tion Section of Corporatio tre of Tallahas Monroe Street see, FL 32303	ssee t, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ool & Cleaning Services LLC
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number <u>L 24 00011289</u> This amendment is submitted to amend the follow  A. If amending name, enter the new name of the	ring:
The new name must be distinguishable and contain the word Enter new principal offices address, if applicab (Principal office address MUST BE A STREET).	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	28)
B. If amending the registered agent and/or reg agent and/or the new registered office address l	istered office address on our records, enter the name of the new registered here:
Name of New Registered Agent:	Jin Yao :-
New Registered Office Address:	8429 Woburn CT Enter Florida street address
	Windermere Florida 34786  Zip Code
Name Designation of Association Designation of the continue Designation	mintaged & maneta

## 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>	Name	Address	Type of Action
MGR	Yao, Jin J	5168 W Colonial DV	□Add
		Orlando, FL, 32808	Remove
			□Change
MGR	Yao, Jin	5168 W Colonial Dr	XAdd
		Orlando, FL, 32808	□Remove
			□Change
			□Add
			□Remove
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an effective date is listed ote: If the date inser	ner than the date of Ed, the date must be speci- rted in this block does date on the Departmer	fic and cannot be prior to s not meet the applica	o date of filing or more to ble statutory filing rec	(optional) nan 90 days after filing quirements, this date	) Pursuant to 605.020 will not be listed a
ecord specifies a del is filed.	layed effective date, b	ut not an effective tir	ne, at 12:01 a.m. on th	ne earlier of: (b) Th	e 90th day after th
ated	3/15/2020	4.	_·		
		3			
	Cinnet	a of a mombar or sutha	rized representative of a	member	

Filing Fee: \$25.00