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(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to 1	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration S Division of Co		
	ERS CLEANING SERVICES	OF SARASOTA LLC
SUBJECT:	Name of Lim	ited Liability Company
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing.
Please return all corresp	ondence concerning this matter	to the following:
	AMANDA NICOLE SAN	TOS CORREA
		Name of Person
		Firm/Company
	6211 MEDICI CT APT 30	8
		Address
	SARASOTA, FL 34243	
	thesisterscleaningservices5	City/State and Zip Code @gmail.com
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please c	all:
AMANDA		201 937-0753 at ()
Name	of Person	Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:	
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Street Address
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ES OF SARASOTA LLC		
Liability Company as it now apper Florida Limited Liability Company	rars on our records.)	
oility Company were filed on 1	May 17,2024	and assigned
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ving:		
he limited liability company	<u>here</u> :	
ds "Limited Liability Company," the	e designation "LLC" or the	e abbreviation "L.L.C."
ole:		
ADDRESS)		
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gistered office address on our here:	records, <u>enter the n</u>	ame of the new registere
Enter F	larida street address	
LIMET		
City	, Florida	Zip Code
	Liability Company as it now apper Florida Limited Liability Company bility Company were filed on display company with the limited Liability Company the site: ADDRESS) Distered office address on our here: Enter F	Liability Company as it now appears on our records.) Florida Limited Liability Company) oility Company were filed on May 17,2024 de limited liability company here: ds "Limited Liability Company." the designation "LLC" or the ole: ADDRESS) distered office address on our records, enter the next here: Enter Florida street address Florida

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 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
MGR	Gabriela F Maia Santos Batista	6211 Medici Ct APT 308, Sarasota, FL 34243	□Adđ
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			🗆 Add
			□Remove
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			□Add
			□Remove
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			☐Remove?
			☐Change-
			⊡Add ☐
			Change

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