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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Sec Division of Corp		ı	
SUBJECT. A King	Cleaning Services	LLC ·	
SUBJECT:	Cleaning Services	ted Liability Company	
			202
	Amendment and fee(s) are subredence concerning this matter t	_	0024 JEE 22
•	g i i i i i i	.	PA PA
	Jennifer I	Name of Person	8 I :21 KA
	1 1/. Cl	C	
	1 King Cleaning	Services Firm/Company	
		· mit Company	
	1395 SW Vici	una Ln.	
	<u></u>	Address	
	Port St. Luc	City/State and Zin Code	
	4 14	City/State and Zip Code	
	Jenn. 1 King Cle	aning @ gmail Com o be used for future annual report notif	
	E-mail address: (6	o be used for future annual report notil	ication)
For further information co	ncerning this matter, please ca	II:	
Jennifer Lus	s	at (<u>772</u>) <u>342 · 40</u> Area Code Daytime	6 90
Name of	Person	Area Code Daytimo	e Telephone Number
Enclosed is a check for the	following amount:		
至 \$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 enclosed)
<u>Mailing Address</u> Registration Se		Street Address: Registration Sec	rtion
Division of Co		Division of Cor	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF ORGANIZATION

OF

L King Cleaning Services LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(Name of the Limited Liability Co (A Florida Limi	ited Liability Company)	·- œ
The Articles of Organization for this Limited Liability Comp Florida document number <u>224000286001</u> .	pany were filed on $6/25/202$	ਪ੍ਰ and assigned
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 L	.iability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	 	
	-	
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	Citv	Zip Code

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.

It 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	Jennifer Luss	1395 SW Vicuna Ln.	\(\sigma_Add\)
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