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## **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT:	50mm	it 24/7 cleaning LLC		
Name of Limited Liability Company				
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.		
Please return all correspon	ndence concerning this matter t	o the following:		
	Angela M	Valenzuela colderon Name of Person		
		duefle		
	1332 West 21 St Street APTO 1			
	Address			
	TackSonville FL 32209  City/State and Zip Code			
	11 ,	City/State and Zip Code		
	E-mail address: (t	in Snumber 1 @ Smail Com o be used for future annual report notification)		
For further information co	oncerning this matter, please ca	11:		
Angelo M Val	enzuela Colde	vCu <sub>at</sub> (904) 930 74 12  Area Code Daytime Telephone Number		
Name of	Person	Area Code Daytime Telephone Number		
Enclosed is a check for th	e following amount:			
⊠(\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
Mailing Addres	<del></del>	Street Address:		
Registration S Division of C		Registration Section Division of Corporations		
P.O. Box 632		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Zip Code

The state of the s
(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)
e Articles of Organization for this Limited Liability Company were filed on 07-05-2024 and assigned rida document number 124000300668
s amendment is submitted to amend the following:
If amending name, enter the new name of the limited liability company here:  The Cleaning Number 1 LLC  new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if applicable:  incipal office address MUST BE A STREET ADDRESS)
ter new mailing address, if applicable:  ailing address MAY BE A POST OFFICE BOX)
If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  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.

City

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 Title Name <u>Address</u> **Type of Action** \_\_\_\_\_ □Remove ☐ Change \_\_\_\_\_ □Add □Remove ☐ Change □Remove □Remove \_\_\_\_\_ □ Change \_\_\_\_\_ □Add \_\_\_\_\_ Change \_\_\_\_\_\_\_DAdd

\_\_\_\_\_ □Remove

\_\_\_\_\_ Change

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ffective	e date, if other than the date of filing: (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
locumen	it's effective date on the Department of State's records.
record s d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d 15 ffied	i.
\d	07-79 7074
Jated	07-29, 2024. Qualfratio
	Quel Valle
	Signature of a member or authorized representative of a member
	Angela M Valenzuela Calderón Typed or printed name of signee

Filing Fee: \$25.00