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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	CT: <u>(1901</u>		CONING SOVVIC	US, LLC
The enc	losed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspon	dence concerning this matter	to the following:	
		Amie L.	Name of Person	
		Clean From	Firm/Company	Services, LLC
		2417 US HI	NY 441 Jan Address	·
		Fruitland	Park, FL 34- City/State and Zip Code	131
		Omienkouc E-mail address-(1	6 be used for future annual report noti	fication)
For furth	ner information co	ncerning this matter, please ca	ılı:	
Am	Name of	Person		6 - 870 e Telephone Number
Enclosed	l is a check for the	following amount:		,
□ \$ 25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Clean tyeaks Clean (Name of the Limited Liability Comp. (A Florida Limited	pany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compan	y were filed on 16 6 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
Clean Biz LLC The new name must be distinguishable and contain the words "Limited Lial	bility Company." the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2417 US HWY 441/27
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2417 US HWY 441/27 Fruitland Park, FL 34731
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the new
Name of New Registered Agent:	5»
New Registered Office Address:	Enter Florida street address
	, Florida
	City 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.

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
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			□ Remove
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effective 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 60. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list.	effective date is listed, the date must be specific and cannot be prior to date of	of filing or more than 90 days after filing.) Pursuant to 60
	anon y entouve date on the separation of outer 5 records.	
ment's effective date on the Department of State's records.	record specifies a delayed effective date, but not an e	ffective time, at 12:01 a.m. on the earl
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Filing Fee: \$25.00