L20000030670

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2020 NOV -2 PH 12: 46

12/9/20 8A

COVER LETTER

ΓΟ: Registration Sec Division of Corp		•
	SPACE 2 LLC	•
SUBJECT:	Name of Limit	ed Liability Company
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.
Please return all correspo	ndence concerning this matter t	o the following:
	COLLEEN I BURSON	
		Name of Person
	A CLEAN SPACE 2 LLC	
		Firm/Company
	956 JOHN WAYNE CIRC	LE
		Address
	FORT WALTON BEACH	F1, 32547
		City/State and Zip Code
	ACLEANSPACELLC@GM E-mail address: 0	in be used for future annual report notification)
For further information of	oncerning this matter, please ca	All:
COLLEEN I BURSON		850 280-4960 at ()
Name (of Person	Area Code Daytime Telephone Number
Enclosed is a check for t	he 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) ☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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

A CLEAN SPACE 2 LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number 1.20000030670	Company were filed on 01/24/2020	and assigned
This amendment is submitted to amend the following:		2020
A. If amending name, enter the new name of the lin	nited liability company here:	Z0Z0 NOV - PT L
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or	The arrest of the second
Enter new principal offices address, if applicable:		FH D
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
B. If amending the registered agent and/or registero agent and/or the new registered office address here:		name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	la
	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 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 COLLEEN I BURSON		956 JOHN WAYNE CIRCLE	= Add
		FORT WALTON BEACH FL 32547	□Remove
			□Change
			2020
			ZDZO NO Rempve
			TChange
			7 □Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			Change

				
				
			. 2	
			2020 NOV	
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			PH 12:	
				
				
Affective date, if other than the fan effective date is listed, the date must Note: If the date inserted in this blood document's effective date on the Document.	ick does not meet the applicable sta	of filing or more than 90 days aften ntutory filing requirements, thi	onal) r filing.) Pursuant to 605.0207 s date will not be listed as	(3)(h) the
record specifies a delayed effective d is filed.	date, but not an effective time, at	12:01 a.m. on the earlier of: (1	5) The 90th day after the	
OCTOBER 27	2020			
<u> </u>	Signature of a member or authorized re			

Filing Fee: \$25.00