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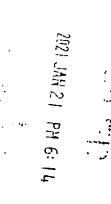
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MAR 0 3 2021 S. YOUNG



TO: Registration Division of C	n Section Corporations		
	Y'S MOBILE DETAILING, LLC		
SUBJECT:	Name of Lim	ited Liability Company	 ,
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	TOMAS SAJANEK		
		Name of Person	
		Firm/Company	
	3630 59TH AVE W		
		Address	
	BRADENTON, FL 34210		
	<u></u>	City/State and Zip Code	
	T.Sajass@seznam.cz		······································
For further information	t:-mail address: (on concerning this matter, please c	to be used for future annual report n	ouncation)
TOMAS SAJANEK		01 941-264-8 at ()	3370
Nar	ne of Person	Area Code Days	time Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fed	e \$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 Ad</u>	dress: on Section	Street Address: Registration	
•	of Corporations	Division of C	
P.O. Box	6327	The Centre o	
Tallahasse	ee, FL 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION OF

TOMMY'S MOBILE DETAILING, LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	iny as it now appears on our re Liability Company)	cords.)	133.
			and assigned"
The Articles of Organization for this Limited Liability Company	were filed on DECEMBER	R 07, 2020	and assigned"
Florida document number L20000380715			
		•	무
This amendment is submitted to amend the following:			ف
A. If amending name, enter the new name of the limited liab	ility company here:		-
TOM'S BOAT DETAILING LLE			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	'LLC" or the abbrevia	ition "L.L.C."
Enter new principal offices address, if applicable:			
• • •			
(Principal office address MUST BE A STREET ADDRESS)			
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
· · · · · · · · · · · · · · · · · · ·			
),
B. If amending the registered agent and/or registered office a	address on our records, er	nter the name of t	he new regist
agent and/or the new registered office address here:	, _		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street aa	ddraes	•
	Enter rioriaa street aaaress		
		, Florida	p Code
	City	Ziį	o Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre	ee to act in this capacity	I further garee to	o comply with
provisions of all statutes relative to the proper and complete			

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.

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## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			Change
			□Add
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			□Change

Fective date, if other than the date of filing:		
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Signature of a member or authorized representative of a member  [optional]  [o		_
Signature of a member or authorized representative of a member  [optional]  [o		
Signature of a member or authorized representative of a member  [optional]  [o		
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