## 121000094158

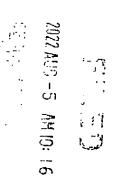
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Subject: SJ3 Serv	ices LLC
	ne of Limited Liability Company
The enclosed Articles of Amendment and fee(s	) are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Duyar	ne Collier Nume of Person
	Company Firm/Company
9359	103-d 5+ Address
Jackso	onville Fl 32210 City/State and Zip Code
E-mail:	3 Services el Yahoo- com address: (to be used for future annual report notification)
For further information concerning this matter.	please call:
Duyane Collier Name of Person	at (904) 581 - 4575 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fe Certificate of S	
Mailing Address: Powietration Section	Street Address: Registration Section
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5J3 Services LLC	· <u>'</u> '.''
(Name of the Limited Liability Compar (A Florida Limited L	in as it now appears on our records.) inbility Company)
The Articles of Organization for this Limited Liability Company Florida document number $2200094158$	were filed on 8-1-2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
	Wipe Me down Mobile detailing ity Company," the designation "LLC" or the abbreviation "LLC." ILC
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	9359 103rd St Jacksonville F1, 32210
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	9359 103rd st Jacksonville F1, 32210
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records. enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address:  9359	ne collier  103-d st  Enter Florida street address
Jack	Sonjille Florida 32210

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager ·AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			Change
			□Add
			Remove
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ffective date, if other than the date of the an effective date is listed, the date must be specified of the date inserted in this block does a parament's effective date on the Department.	not meet the appl	icable statutory	or more than 90 da filing requiremen	( <b>optional)</b> nys after filing.) Pu nts, this date will	rsuant to ( not be l	605.0207 ( listed as t
record specifies a delayed effective date, bu is filed.	it not an effective	time, at 12:01 a	i.m. on the earlie	r of: (b) The 90	th day a	fter the
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