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COVER LETTER

TO: Registration Se Division of Cor				•	
SUBJECT: SDS	RELiable Cle	cening Service Ll	-C		
	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Sixto S	an ta Name of Person			
		FirmCompany			
		Golden Gate a			
	stuart 1	1 34997 City/State and Zin Code		2074 J.M.	er y
	Six to 3122 Yal.	City/State and Zip Code 200. Com to be used for future annual report noti	fication)	2-in 75	,
For further information c	oncerning this matter, please ca			5	
Sixto Sant	/ ca	at (<u>772</u>) <u>486-2</u> Area Code Daytim	3/2/	. 역 <u></u> 위 루	
Name o	f Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for th	ne following amount:				
Certificate of Status Certified Copy Certificate of Status Certified Copy Certificate of Status Certified Copy is enclosed Certificate of Status Certified Copy is enclosed Certificate of Status Certified Copy is enclosed Certified Copy is enclosed Certified Copy is enclosed Certified Copy is enclosed Certified Copy in Certified Copy is enclosed Certified Copy in Certified Copy in Certified Copy is enclosed in Certified Copy in Certified Cop			Certified (e of Status &	
Mailing Addres Registration S	Section	Street Address: Registration Sec			
Division of C P.O. Box 632		Division of Cor The Centre of T	-		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5DS Reliable Cleaning (Name of the Limited Liability Compa	Service LLC iny as it now appears on our records.) Clability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\angle 21000180719$.	were filed on April 19 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
<u>N/A</u>	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	26
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new</u> registered
Name of New Registered Agent:	N/A
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.

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	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Dawn 1 Rosario	1502 SE Royal Green Circle	
		Port St. Luie 34952	 X Remove
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