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Y. SCOTT MAR 26 2022

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, Fl. 32314

	DET'S N	10BILE CLEANING.LLC			
SUBJECT:		Name of Limi	ted Liability Company		-
		Amendment and fee(s) are sub-			
		EVEL CADET			
			Name of Person		_
		CADET'S MOBILE CLEA	ANING.LLC		
		Firm/Company			_
		5412 CROSS CREEK DR	APT 105		
		Address			_
		ORLANDO, FL 32839			202: Sign
		City/State and Zip Code			- 2 11
		eventzcia12t@gmail.com		 	
For further infort	nation c	E-mail address: () oncerning this matter, please ca	to be used for future annual report notifi all:	cation)	2022 MAR 17 PM 3: 08 SECRETAINY OF STATE TALLIAMASSEE, FL
EVEL CADET			561 7671896		3: 08 3: 77 3: 77 3: 77 3: 77 5: 77 5: 77 5: 77 5: 77 5: 77 5: 77 5: 77 7: 77 7 7 7
	Name o	f Person		Telephone Numb	ber
Enclosed is a cho	eck for th	ne following amount:			
■ \$25.00 Filing	g Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi Certifi	Filing Fee, icate of Status & ied Copy mal copy is enclosed)
Regist Divisi		Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CADET'S MOBILE CLEANING, LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comparing document number L21000448855	any were filed on 10/14/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited l	liability company here:
CADET MOBILE CLEANING, LLC	
The new name must be distinguishable and contain the words "Limited L	Jability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the name of the new regis
Name of New Registered Agent: N/A	17 P
New Registered Office Address:	Enter Florida street address 77 8
	, 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 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
N/A		·	□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Remove
			2022 MAR 17 PM 3: 08
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