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Florida Department of State
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Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : PROFESSIONAL TAX PREPARATION LLC
Account Number : I20210000081
Phone : (407)933-4211
Fax Number : (407)679-0387

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: leovarelam010@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JLV MASTER CLEANING & ESTIMATES LLC

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COVER LETTER

H24000029383

TO: Registration Section
Division of Corporations

SUBJECT: FLV MASTER CLEANING & ESTIMATES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE L VARELA MONTILVA
Name of Person

V MASTER CLEANING & ESTIMATES LLC
Firm/Company

533 VILLA DEL SOL CIR APT 202
Address

ORLANDO FLORIDA 32824
City/State and Zip Code

leovarelam01@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose L vVarela Montilva at (407) 9553010
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee ☒ $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)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H24000029383

J LV MASTER CLEANING & ESTIMATES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/27/2023 and assigned Florida document number L23000104236.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JLV MASTER COOLING LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

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TALLAHASSEE, FL

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida *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 Changing Registered Agent, Signature of New Registered Agent

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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	Name	Address	Type of Action
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change
_____	_____	_____	☐Add
		_____	☐Remove
		_____	☐Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

NAME CHANGE ONLY

E. Effective date, if other than the date of filing: 01/22/2024 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 01/22/2024

Signature of a member or authorized representative of a member

Jose Leonardo Varela Montilva

Typed or printed name of signee

H24000293383.

Filing Fee: $25.00