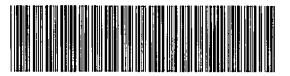
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COVER LETTER

TO:	Registration Se Division of Cor			·
SUBJE	A-1-4-	ozone Solutions of the Gulf Cox	ist LLC	
SOBJE	C1.		ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Jenny Countz		
			Name of Person	
		ZenBusiness Inc.		
			Firm/Company	
		5511 Parkerest Drive, Suit	e 103	
			Address	······································
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.cc E-mail address: (om to be used for future annual report no	titication)
For furtl	her information c	oncerning this matter, please c	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Jenny C	Countz		844 493-6249	
	Name o	f Person	at () Area Code Daytii	ne Telephone Number
Enclosed	d is a check for th	ne following amount:		
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street Address:	*
	Registration S		Registration Se	

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Accurate Ozone Solutions of the Gulf Coast LLC

2022 JAH 28 AM 7: 23

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 1.20000178560	were filed on $\frac{06/25/2020}{}$ and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
StinkClean.com LLC			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	552 Frandor Pl		
(Principal office address MUST BE A STREET ADDRESS)	Apollo Beach, FL 33572-2544		
Enter new mailing address, if applicable:	235 Apollo Beach Blvd		
(Mailing address MAY BE A POST OFFICE BOX)	#205		
	Apollo Beach, FL 33572		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new regis		
New Registered Office Address:			
	Enter Florida street address		
	Florida		
	City Zup Code		

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

<u>Title</u>	Name	Address	Type of Action
			🗆 Add
			□Remove
			□Change
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Effective date, if other than the It'an effective date is listed, the date made in this I document's effective date on the I	block does not meet the	e applicable statuto	ing or more than 90 ry filing requirem	(optional) days after filing.) Pursua ents, this date will no	nt to 605.0207 (. t be listed as th
e record specifies a delayed effecti rd is filed.	ive date, but not an effe	ective time, at 12:0	l a.m. on the earl	er of: (b) The 90th c	lay after the
Dated January 20		2			
$I_{-}I_{-}CI_{-}\ldots I_{-}CI_{-}$	ell				
/s/ Sherri Southwe					
/s/ Sherri Southwe	Signature of a member	or authorized repres	entative of a member	r	