

h07000062941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

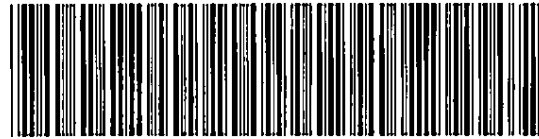
(Document Number)

Certified Copies _____ Certificates of Status _____

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Admin

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RECEIVED

SEP 08 2020

09/09/20--01002 - 015 **60.00

VOID

Had requested for this amendment not to be filed and to refund his money.

OS & DCC.

OCT 17 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AAA QUALITY CLEAN CUT, LLC
Name of Limited Liability Company

VOID

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

Please return all correspondence concerning this matter to the following:

Michael Higinbotham

Name of Person

Abacus Advantage Inc.

Firm/Company

2219 Lee Terrace

Address

Port Charlotte, FL 33952

City/State and Zip Code

Michael.Abacus@Outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Higinbotham

941

629-2244

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VOID

AAA QUALITY CLEAN CUT, 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 June 13th, 2007 and assigned Florida document number L07000062941.

This amendment is submitted to amend the following:

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

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)

102 Algiers Drive

Venice, FL 34293

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

102 Algiers Drive

Venice, FL 34293

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:

Michael Higinbotham

New Registered Office Address:

2219 Lee Terrace

Enter Florida street address

Port Charlotte

City

, Florida 33952

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

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Charles J Cantasano	1173 Vernon Avenue	<input type="checkbox"/> Add
		Port Charlotte, FL 33948	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Chad Gorrell	102 Algiers Drive	<input checked="" type="checkbox"/> Add
		Venice, FL 34293	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Change EIN number

26-0436328 -> 85-2663231

Remove EIN number 26-0436328 and Add EIN number 85-2663231

E. Effective date, if other than the date of filing: _____ **(optional)**

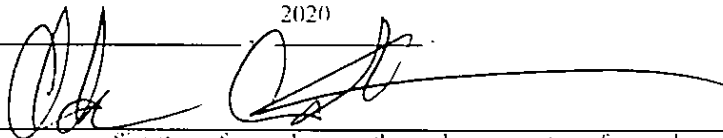
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 September 2nd

2020



Signature of a member or authorized representative of a member

Charles J. Cantasano

Typed or printed name of signee