## 09000019137

	(Requestor's Name)
	(Address)
	(Address)
_	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



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Y SULKER

## Advanced Incorporating Service

1317 California Street P.O. Box 20396

Tallahassee, FL 32316

Phone: 850-222-CORP Fax: 850-575-2724

Email: wlopez@aisincfl.com Website: www.aisincfl.com

Vero Beach Dry Cleaners + Launderers, LLC	
Launderers, C.C.	
	FOR OFFICE USE ONLY
PICK ONE:	
CERTIFIED COPYPHOTOCOPY _	C.U.S.
FILING:	
CORPORATIONLLCLIMITED PARTNERSHIP	_GENERAL PARTNERSHIP
FICTITIOUS NAMESERVICEMARK/TRADEMARK _	AMENDMENT
FOREIGN QUALIFICATIONJUDGMENT	LIEN
OTHER	_
RETRIEVAL:	
GOOD STANDING CERT/C.U.SCERTIFIED COPY	PHOTOCOPY
Of	
APOSTILLE/NOTARY CERTIFICATION REQUEST:	
Country	_
Amount of Documents	
DATE //3/22 TIME	
Notes:	<del></del>

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VERO BE	EACH DRY CLEAN	NERS & LAUNDERERS	S, LLC			
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on c Liability Company)	ur records.)			
The Articles of Organization for this Limited 1	Liability Company	y were filed onFBBI	RUARY 26, 20	09 and as	signed	i
Plorida document numberL09000019137	·					
This amendment is submitted to amend the fol	llowing:					
A. If amending name, enter the new name	of the limited liab	nillty company here:				
N/A						
The new name must be distinguishable and contain the	words "Limited Liabl	ility Company," the designs	tion "LLC" or th	o abbreviation "L	.L.C."	
Enter new principal offices address, if appli	cable:	N/A		<del></del>		
(Principal office address MUST BE A STRE	ET ADDRESS)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>: BOX)</u>	VERO BEACH, FL 3	2960	······································	(2)	
B. If amending the registered agent and/or a agent and/or the new registered office addre		address on our record	s, enter the m	ame of the ne	w'regis	tered
Name of New Registered Agent:	JOSEPH DIDO	MENICO		- ; :- }	<u>त्यं</u> लं	- <sup>§</sup>
New Registered Office Address:	4201 20TH STF	·		m	- ··	<del></del> -
		Enter Florida stre	et address			
	VBRO BEACH		, Florida	32960		
		Cly		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.

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
MORM	OTTAVIO DIDOMENICO	5976 20TH STREET #86	□Add
		VERO BEACH, FL 32966	≅Remove
			☐ Change
MGRM	JOSEPH DIDOMENICO	4201 20TH STREET	<b>≅</b> Add
		VERO BEACH, FL 32960	ШRетюvо
			□Change
<del></del> .			□Add
			□Remove
	·		□Add
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		□Remove	
			Change
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			□Remove
			Πα

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()	Dated .	December 7, 2021
		- Other
Deborah A. Fong, Personal Representative of the Estate of Ottaula Frank DiDamenica		Signature of a member or authorized representative of a member
		Deharsh A Rong Personal Person

Filing Fee: \$25.00