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OBRUCE AND

COVER LETTER

Division of C		•			
Perfect M SUBJECT:	latch Enterprise				
SUBJECT:	Name of Lir	nited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
	oondence concerning this matter	-			
	Dargel Exposito				
		Name of Person			
	Perfect Match Enterprise				
		Firm/Company			
	2657 47th st Sw				
	-	Address		20	
	Naples Fl. 34116			2020 SEP -4	•.•
	dargel85@aol.com	City/State and Zip Code		- · · · · · · · · · · · · · · · · · · ·	
	E-mail address: (to be used for future annual report noti	fication)	사 · 글	
For further information	concerning this matter, please c	all:		AM 7: 24 SSEC PLE	•
Dargel Exposito		239 9192657		高	
Name	of Person	at () Area Code Daytime	e Telephone Number		
Enclosed is a check for t	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 Filin Certificate of Certified Co (additional cop	of Status &	
Mailing Addre Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	porations		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A & D Eco Services 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 $\frac{09/01/2020}{1}$ _ and assigned Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Perfect Match Enterprise LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2657 47th st Sw Naples Ft 34116 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 2657 47th st Sw Naples FL 34116 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:

			3 3	2020	
Name of New Registered Agent:	n/a —		<u>Lange</u>	SE	
New Registered Office Address:			: "" '	1	· · · ·
		Enter Florida street address	777 7717 7717	₽	, r.,
		Florida	٠٠٠سأ	1	-
aw Pagistared Agent's Signature if shancing I	Degistered towns	City	Zıp Code	12	

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>	Address	Type of Action
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	ive date, if other than the date of filing: (optional) fective 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 60	
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