L14000174143

(Re	equestor's Name)
(Ac	ldress)	
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(Ci	ty/State/Zip/Phor	ne #)
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COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:		QUEEN OF CLEAN LLC		
SOBILCI.	· 	Name of Lim	ited Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		DILAROM SADULLAEV	'A	
			Name of Person	
		LILY.THE QUEEN OF C	LEAN LLC	
			Firm/Company	
		6648 CATANIA DRIVE		
			Address	
		BOYNTON BEACH, FL	33472	
		100 1 01/1 1700 0 01/1 1/1 0	City/State and Zip Code	
		ISSACKATS2@GMAIL.C	OM to be used for future annual report notil	Teation)
For further.	information co	oncerning this matter, please co	nil:	
DILAROM	SAULLAEV	A	303 472-9957	
	Name of	Person	at () Area Code Daytime	e Telephone Number
Enclosed is	a check for th	e 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LILY.THE QUEEN OF CLEAM LLC		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on ou Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liab Florida document number L14000174143	oility Company were filed on	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word		on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •	***************************************	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
		, Florida
	City	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

Page 1 of 3

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
AMBR	DILAROM SADULLAEVA	6648 CATANIA DRIVE	■ ∧dd
		BOYNTON BEACH, FL 33472	Remove
			☐ Change
MGR	ROKHAT S SADULLAEVA, SR.	1101 CACTUS TERRACE	Add
		DELRAY BEACH, FL 33445	Remove
			□ Change
***************************************			Add
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