

L15000 111 771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

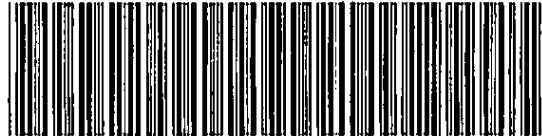
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04/27/22--01013--010 **52.50

FILED
2022 JUL 21 AM 9:14
TALLAHASSEE, FLORIDA

JUL 26 2022

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2022

TIMOTHY F. HALL
TL CLEAN, LLC
28 FARRADAY LN
PALM COAST, FL 32137 US

SUBJECT: TL CLEAN, LLC
Ref. Number: L15000111771

We have received your document for TL CLEAN, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED PARTNERSHIP, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 122A00013721

** Please note, the enclosed "extra" doc (POY'S RESIDENTIAL & COMMERCIAL CLEANING, LLC) was included in your mailing to me. I'm certain it was simply by mistake.*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TL CLEAN, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

TIMOTHY F. HALL
Name of Person

TL CLEAN, LLC
Firm/Company

40 WESTGATE LN. *(NEW ADDRESS)*
Address

PALEM COAST, FL 32164
City/State and Zip Code

tfhall19@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIMOTHY HALL at (530) 409-3200
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 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**

TL CLEAN, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2022 JUL 21 AM 9:14
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 6/26/2015 and assigned
Florida document number L15000111771.

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)

40 WESTGATE LN.
PALM COAST, FL 32164

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME

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:

N/A

New Registered Office Address:

40 WESTGATE LN.

Enter Florida street address

PALM COAST

City

Florida

32164

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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

(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)

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

6/30/22

174 Hall

Signature of a member or authorized representative of a member

TIMOTHY F. HALL

Typed or printed name of signee

2022 JUL 21 AM 9:14
OFFICE OF STATE
ATTORNEY, FLORIDA