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end nee		OUSE LIQUIDS, LLC			
Division of Corporations CLEAN HOUSE LIQUIDS, 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: ERIK J. ARROYO, ESQ Name of Person BAND, GATES & DRAMIS, P.L. Firm/Company 2070 RINGLING BLVD. Address SARASOTA, FLORIDA 34237 City/Natae and Zip Code EARROYO@BANDGATESDRAMIS.COM B-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ERIK ARROYO 941 366-8010 Area Code Daytine Telephone Number 37 Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)					
			<u>-</u>		
		ERIK J. ARROYO, ESQ	!		
		BAND, GATES & DRAM			
		2070 RINGLING BLVD.			
		SARASOTA, FLORIDA			
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For furthe	r information c		·		
ERIK AR	ROYO		_	. Q	•
	Name o	f Person	Area Code Daytim		
Enclosed	is a check for tl	ne following amount:			
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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

CLEAN HOUSE LIQUIDS, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number L16000143890		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDR.)		abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		er the name of the no
Name of New Registered Agent:		-0 :0-
New Registered Office Address:	Enter Florida street address	ੁੱ
	,, Florida	Ľ.
	City , Florida	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>	Type of Action
MGR	KEITH. TANYA	1199 TALLEVAST ROAD	
		SARASOTA, FLORIDA 34243	
			□ Remove
			Change
MGR	KEITH, DUSTIN	1199 TALLEVAST ROAD	
			
		SARASOTA, FLORIDA 34243	
			Remove
			■ Change
			Add
			Remove
			☐ Change
			Change
			Remove
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			Add
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amending any other information, enter change(s) here: (Attach additional sheets, if neces		
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record specifies a delayed effective date, but not an effective time, at 12:01 a The 90th day after the record is filed.	m. on the	e earlier o
ted		
Signature of a members authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00