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COVER LETTER

	Registration Section Division of Corpor	rations		
SUBJEC	r: <u>Pr</u> i	STING	CLEIAN P	MRTKIERS LLC
		Name of Lim	ited Liability Company	
The enclos	sed Articles of Am	nendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all corresponde	ence concerning this matter	to the following:	
		0	LE BRED	BERG
			Name of Person	
		PRISTI	KE CLEAK	PARTMERS
			Firm/Company	
	c	5440 P.	CKEBARK	LAKCE
			Address	
	(WESLEY	CHAPE	C, FL 33543 LIFEECAPITAL. CO
	(OBREDBER	City/State and Zip Code CG @ Rock Co	LIFEECAPITAL. CO
		E-mail address: (1	to be used for future annual report not	ification)
For further	information conc	erning this matter, please ca	ıll:	
00	E Ba	EDBERG	at (813) 2°	73-3225
· · · · · ·	Name of Pe	rson	Area Code Daytin	ne Telephone Number
Enclosed i	s a check for the fo	ollowing 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

PRISTING CLEAN PARTNERS 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 160. 14, 2016 and assigned Florida document number 4 16000 20 899 2 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company her CINDERELLA GREEN & CLEAN, LLC 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) 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: Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			☐ Remove
			☐ Change
			Add
		-	□ Remove
		·	Change
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		*****	☐ Change
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n effective date is listed, the date m	ust be specific and ca	innot be prior to da	ate of filing or more	option (option) han 90 days after fil	ing.) Pursuant to 605.02
te: If the date inserted in this but the later on the lat	block does not mee Department of Stat	et the applicable te's records.	statutory filing re	quirements, this d	ate will not be listed a
record specifies a delaye he 90th day after the re	ed effective dat cord is filed.	e, but not ar	n effective time	e, at 12:01 a.r	n. on the earlier
ted Wescey	CHAPEL,	04/19/2	017		
			<i>T</i>) \		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00