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(Business Entity Name)
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J. HARRIS

COVER LETTER

10:	Registration Se Division of Cor			
SUBJI	Emerald Co	past Steam Cleaning, LLC		
		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Dennis P Gagnon Jr		
			Name of Person	
			Firm/Company	
		353 Walton Way		
			Address	· · · ·
		Miramar Beach, FL 32550	1	
			City/State and Zip Code	
		dennisjr@ahifl.com		
			to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please ca	all:	
Denni	s P Gagnon Jr		850 259-1414 at ()	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclos	sed is a check for th	e following amount:		
□ \$2	5.00 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

Emerald Coast Steam Cleaning, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records. imited Liability Company))
The Articles of Organization for this Limited Liability Cor	mpany were filed on 1/12/2017	and assigned
Florida document number L16000215992		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	,
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	*****	
Principal office address MUST BE A STREET ADDRE	<u> </u>	
		3 20 20 20 20 20 20 20 20 20 20 20 20 20
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
D. If amounting the marietand and and and an interest		•
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida
	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

MGR= M AMBR= A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			□ Change
			Add
			Remove
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· 			Add
			□ Remove
			□ Change
			Add
			□ Remove
			Change
			Remove.
	,		He hange D
			BAdd Add Add
			Remove

the Secretary and assign 25% ov	wnership to them. Dennis P Gagnon Jr. will also have 25% ownership while
Brian Morgan has 50% ownersig	p
-	
ffective date, if other than the da	ate of filing: 2/28/2017 (optional)
	e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 k does not meet the applicable statutory filing requirements, this date will not be listed between of State's records
seament's effective date on the Depa	
e record specifies a delayed e The 90th day after the record	iffective date, but not an effective time, at $12:01\ a.m.$ on the earlier d is filed.
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Filing Fee: \$25.00