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COVER LETTER

Division of Corp	orations		
SUBJECT: FJD	Power Washing	, LLC	
SUBJECT.	Name of Lim	ited Liability Company	
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The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Francisco	Dellepiane	
		Name of Person	
The enclosed Articles of Amendment and fects) are submitted for filling. Please return all correspondence concerning this matter to the following: Francisco Dellepane			
		Firm/Company	
SUBJECT: FID Power Washing LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Francisco Dellegiane Name of Person FSD Rwer Lucybuse Firm/Complany 883 S. Lucrad o Cf Address Lake Mary Florida 32.746 City/State and Zip Code FJD Exterior/Cleaning @ Jahoo Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Francisco at UST Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filling Fee S0.00 Filling Fee & Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Street Address:			
		Address	
	Lake Mo	ary Florida 3274	6
		City/State and Zip Code	
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Franci	Jw	ar (407) 920-	4467
Name of	Person	Area Code Daytime	Telephone Number
E. J. J. J. Jahren & Compthy	. C-11		
Enclosed is a check for the			
\$25.00 Filing Fee		Certified Copy	Certificate of Status &
		Comma A J.J.	
Mailing Address: Registration Se		Registration Sec	tion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

T():

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

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32746	•
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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 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 $AMBR = A$	Aanager Authorized Member	•	to be promise that the	•
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ed June 26,		. 2021			<u> </u>
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	Signature of a	a member or authorized	representative of a member		13. 13