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## **COVER LETTER**

	istration Se sion of Cor	ction porations -						
CHD IVAT.	TOP SERG	EANT WINDOWS AND PRE	ESSURE CLEANING	G LLC				
SUBJECT	•	* Name of Limited Liability Company						
		Amendment and fee(s) are sub	_					
ricase return	an correspo	ndence concerning this matter	to the following:					
		JANOS A ZSOTER						
			Name of Person	1				
						on E	<b>ာ</b>	
			Firm/Company				7971 SPR	
		3205 BENEVA RD UNIT	201				20	
SUBJECT:  The enclosed Please return  JANOS A.ZS  Enclosed is a			Address				ې ب	Tight.
		SARASOTA, FL 34232					PM 3: 09	
		JANOS.ZSOTER@GMAII	City/State and Zip C COM	lode		四部	: 09	
		E-mail address: (	to be used for future an	mual report notifica	tion)			
For further in:	formation co	oncerning this matter, please ca	all:					
JANOS A.ZS	OTER		941 at (	960-0323				
	Name of	Person	Area Code	Daytime To	elephone Number			
Enclosed is a	check for th	e following amount:						
□ \$25.00 Fi	ling Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Cop (additional copy	y'	Section 1 \$60.00 Filing F Certificate of S Certified Copy (additional copy is	Status &		
	ing Address istration S			et Address:	nn.			

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

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOP SERGEANT WINDOWS AND PRESSURE CLEANING LLC

( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our rec ted Liability Company)	ords.)
The Articles of Organization for this Limited Liability Comp.	any were filed on Florida	and assigned
Florida document number L17000020678		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Top Sergeant CleanGO LLC		-3
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "I	.l.C" or the abhreviations L.L.C."
Enter new principal offices address, if applicable:		3 7
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		- ITI
		May in
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>en</u> t	ler the name of the new registered
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
The Windshift of the Control of the	Enter Florida street ada	Iress
		Florida
	City	FloridaZip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complacept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance of my duties, as provided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
		2000 2000 	202 Remove
			🖂 Ghange
		7 696 FMT FMT TMT TMT T	PAdd C
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(If an eff Note:	ive date, if other than the date of filing:	
f the recor ecord is fi	d 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 led.	
Dated	Saws 9+2 . 04 01 21  Signature of a member or authorized representative of a member	
	JANOS A ZSOTER	
	Typed or printed name of signee	

Filing Fee: \$25.00