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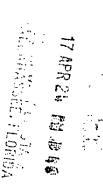
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:	Registration S Division of Co	ection rporations		
CUDIC		I KEEP'S IT CLEAN LĻC		
SUBJE	C1:	· Name of Lim	ited Liability Company	·
7.4				
The end	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all corresp	ondence concerning this matter	to the following:	
		Carmen C Perez		
			Name of Person	
			Firm/Company	
	•	9801 OLD BAYMEDOW	S RD STE 94	
			Address	
		Jacksonville FL 32256		
			City/State and Zip Code	
	•	E-mail address: (to be used for future annual report notific	cation)
For furt	her information	concerning this matter, please co	all:	
Carmer	ı C Perez		904 713-5881 at ()	,
	Name	of Person	Area Code Daytime	Telephone Number
Enclose	d is a check for t	he following 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 OF

CARMEM KEEP'S IT CLEAN L					
(Name of the Lin	ited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) pany)			
The Articles of Organization for this Limited	Liability Company were filed o	on_02/14/2017		and as:	signed
Florida document number L17000036422	•				_
This amendment is submitted to amend the fo	lowing:				
A. If amending name, enter the new name	of the limited liability compa	ny here:			
Carmen Keeps It Clean LLC					
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the	he abbrevi	iation "L	.L.C."
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STRE					
			المعرف	AP.	;;
			201	ਾਹੀਂ Ni	
Enter new mailing address, if applicable:			67	4-	. •
(Mailing address MAY BE A POST OFFICE			77	343.	<u> </u>
internal matress man BE AT 051 OF THE				- Öğ Çür	
					
B. If amending the registered agent and registered agent and/or the new registered of	or registered office addres	s on our records, en	ter the	name	of the n
Name of New Paristand Agents	Carmen C Perez				
Name of New Registered Agent:			•		
New Registered Office Address:	9801 OLD BAYMEADOWS				
		r Florida street address			
	Jacksonville	, Florida			
	City	•	Z	ip 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.

Changing Rogistered Agent, Signature of New Registered Agent

Page 1 of 3

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

Title	<u>Name</u> .	<u>Address</u>	Type of Action
MGR	Carmen C Perez	9801 OLD BAYMEADOWS RD 94	■ Add
		Jacksonville FL 32256	☐ Remove
			☐ Change
		·	Add
			□ Remove
			☐ Change
			Add
			□ Remove
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Filing Fee: \$25.00