## 1170000 61924

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Special Instructions to		
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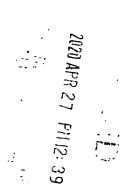
Office Use Only



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DECEMBED AND ADDRESS OF THE ADDRESS



## **COVER LETTER**

CUDIEC					
SUBJEC	1:	Name of Lim	ited Liability Company	Y	
The enclo	sed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
		Jenny Meier			
			Name of Person	n	
		Clean 13, LLC			
Division of Corporations  CLEAN 13, LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    Jenny Meier					
		10600 S Ocean Dr #1204		-	
			Address		<u> </u>
		Jensen Beach, FL 34957			
			City/State and Zip	Code	
		E-mail address: (	to be used for future a	nnual report notifi	cation)
For furthe	er information c	oncerning this matter, please c	all:		
Jenny Me	eier			800-7306	•
	Name o	f Person		Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:			
■ \$25.0	00 Filing Fee	_	Certified Co	ру	Certificate of Status &
					tion
	_			-	
		-			
-	Tallahassee, I	FL 32314	24	15 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEAN 13, LLC

2020 APR 27 PM 12: 39

(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor	npany were filed on 03/17/2017	and assigned
Florida document number L17000061924		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o	office address on our records, enter th	e name of the new regist
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	, Flori	
	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 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

2020 APR 27 PH 12: 39

<u>Title</u>	Name		Type of Action
AMBR	Jason Alan Glass	10600 S Ocean Drive, #1204 Jensen Beach, FL 34957	_ ■Add
			□Remove
			_ □Change
AMBR	Jenny Lynn Meier	10600 S Ocean Drive, #1204 Jensen Beach, FL 34957	_ □Add
			□Remove
			_ <b>≡</b> Change
			_□Add
			_ □Remove
			Change
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	2020 APR 27 PH 12: 39	-
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ective date, if other than the date of filing	(optional) annot be prior to date of filing or more than 90 days after filing.) Pursuant to 605	5 0201
e: If the date inserted in this block does not mument's effective date on the Department of St	et the applicable statutory filing requirements, this date will not be liste	ed as
unient s effective date on the Department of St	ite s records.	
cord specifies a delayed effective date, but not a	n effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
s filed.		
4/21/20 ed,	2020	
,	·	
Asignature of a m	ember or authorized representative of a member	

Filing Fee: \$25.00