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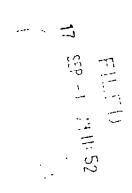
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DISCOTT SEP 5/2011

COVER LETTER

Division of Corporations		
SUBJECT: BroomS	s and Moos II (
3015ECT	Name of Limited Liability Company	-
The enclosed Articles of Amendment as	and fee(s) are submitted for filing.	
Please return all correspondence concer	eming this matter to the following:	
	David Mautes	
_ N /	/ A	
:10:	FirmCompany	
480	51 NW 103" AVE. STE 43B	1
_5,	unrise / Florida and 33	351
0	City/State and Zip Code	
D100	ems and MoPs Cleaning Q Jahoo E-mail address: (to be used for future annual report notification)	Com
For further information concerning this	s matter, please call:	
David Maut	tes = 1,754, 273-4729	<u>. </u>
Name of Person	Area Code Daytime Telephone Nun	ıber
Enclosed is a check for the following ar	emount:	
	icate of Status Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status	Filing Fee. ficate of Status & T fied Copy onal copy is enclosed)
MAILING ADDRES		
Registration Section Division of Corporati		
P.O. Box 6327 Tallahassee, FL 3231	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Drooms and	Mops LL
(Name of the Limited Li (A Fl	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L17000078	ity Company were filed on $04/67/2017$ and assigned
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the	MOPS LLC
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	: 4851 NW 103rd Ave. STE 43B
(Principal office address MUST BE A STREET AL	DDRESS) Sunrise, +L 33351
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	4851 NW 103'd Ave. StE 43B
B. If amending the registered agent and/or registered agent and/or the new registered office a	registered office address on our records, enter the name of the new address here:
Name of New Registered Agent:	David Mautes
New Registered Office Address:	4851 NW 103" Ave STE 43B
_	SUNY 15 City Florida Street address Florida 33351 Zip Code
New Registered Agent's Signature, if changing Regist	tered 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 Degistered 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 Type of Action Name David Mautes 4851 NW 103rd Ave. StE 43 Brown Sunrise, Fl 33351 ☐ Change Djenald Richard 4851 NW 103rd Ave. SHE 43B Add Sunrise, FL 33351 VP Alrickeshia Brooks Please Remove this Person add 8201 Peters Rd STE 1000 Remove Plantation Fl 33324 - Change □ Add ☐ Remove ☐ Change 🗖 Add ☐ Remove □ Add ☐ Remove

Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
The Objective of this Admendent is to
remove my former business partner.
THE COUNTY OF THE PAGE PAGE
new business Dlengld Kichard
E. Effective date, if other than the date of filing:
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(h) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
document's effective date on the 17epartment of State 8 feetings,
If the record 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 record is filed.
NO 129/2017 2017
Dated $08/2/201/$. $201/$.
Signature of a member or authorized representative of a member
David Marile
Typed or printed name of signee
Page 3 of 3 Filing Fee: \$25.00
Filing Fee: \$25.00