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COVER LETTER

TO:		istration Se ision of Cor			
CUD I	DOT.	Phoenix De	luxe Cleaning and Restoration	. LL.C	
ZORI	ECT:		Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The er	nclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return	all correspo	ndence concerning this matter	to the following:	
			Ashley Hodges		
				Name of Person	
			Pheonix Deluxe Cleaning	and Restoration, LLC	
				Firm/Company	*
			1530 Samontee Rd		
			Jacksonville, Fl 32211		
				City/State and Zip Code	- · - · · · · · · · · · · · · · · · · ·
			info@phoenixdeluxe.com		
			E-mail address: (to be used for future annual report notific	cation)
For fu	rther in	formation co	oncerning this matter, please ca	all:	
Ashle	y Hoda	ges		904 397-5353 at ()	
		Name of	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a	check for th	e following amount:		
■ \$2	25.00 F	iling 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

Phoenix Deluxe Cleaning and Restoration, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 05/24/2017 Florida document number 1.17000114507 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cirv

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person, being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Wendell Roy	1530 Samontee Rd	
		Jacksonville, Fl 32211	Remove
			Change
			🖸 Add
			☐ Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	Add
		· 	☐ Remove
			☐ Change
		 	Add
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			□ Add
		·····	☐ Remove
			□ Change

	Please remove Wendell Roy as a manager from this LLC		
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		P.	<u></u>
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	11/13/2017		
lffec fan c	tive date, if other than the date of filing: (optional) fective 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	605.02	:07 (3 <u>(</u> 1
Note	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.		
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	rlier	of:
Th	e 90th day after the record is filed.		
Data	11.14.2017		
Date	Signature of a member or authorized representative of a member		
	I		
	Lyling Harm	_	

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Filing Fee: \$25.00