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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : 120070000160

Phone : (800)494-3124 Fax Number : (305)675-2811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

2017 AUG 22 RM 1: 9 VENTRANSITE, FT ORTH

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNOROF CLEANERS, LLC

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AUG 23 2017

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ه ا	OOF CLEANERS, LLC
ı	illity Company as it now appears on our records.) ida Limited Liubility Company)
(A Flor	ida Limited Liubility Company)
The Articles of Organization for this Limited Liability	Company were filed on AUGUST 15, 2017 and assigned
Florida document number 1.17000174382	
Florida nocument number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
U.S. ROOF CLEANERS, LLC	
The new name must be distinguishable and contain the words "I	limited Liability Company," the designation "LUC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD.	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
(Matting diagress may be 71 (1991 61 1162 60))	
	2 (c)
B. If amending the registered agent and/or re	gistered office address on our records, enter the name of the new
registered agent and/or the new registered office a	ddress here:
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	
New Registering Office Address.	Enter Florida street address
	, Florida
_	City Zlp Code
New Registered Agent's Signature, if changing Regist	cred Agent:
provisions of all statutes relative to the proper an	ent and agree to act in this capacity. I further agree to comply with the id complete performance of my duties, and I am familiar with and d agent as provided for in Chapter 605, F.S. Or, if this document is tered office address, I hereby confirm that the limited liability age.
	If Changing Registered Agent, Signature of New Registered Agent

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MGR= P	i from our records: Manager	H17000223378 3		
AMBR = 7 <u>Title</u>	Authorized Member Name	<u>Address</u>	Type of Action	
				
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ective date, if other than the confective date is listed, the date must be: If the date inserted in this blocument's effective date on the De	partment of State's records.	, station, ming require	
record specifies a delayed The 90th day after the reco	effective date, but not a ord is filed.	n effective time, at 12:	01 a.m. on the earli
redAUGUST 22	2017		
	7		
	Signature of a member or authoriz	ed representative of a member	
	CHRIS SN	OOK name of signee	