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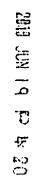
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COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: Da Kine Cleaning Same of Limited Liab	bility Company
The enclosed Articles of Amendment and fee(s) are submitted: Please return all correspondence concerning this matter to the f	-
Donya Kim	Cleveland.
Da' Kine Cla	Paning Service UC
7505 Wils	etire Rd.
dakinectean	FL 30576 State and Zip Code [NGSet Vice IC Ogmail. Compeditor figure annual report notification)
For further information concerning this matter, please call:	
Kim Cleveland.	at (850) 748 - 6438. Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status	55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy Certified Copy radditional copy is enclosed.
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section

Registration Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Da' Kine Cleaning	Service LLC
(A Florida Limited	pany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L18000317</u> .2	y were filed on 25 2119 JUN 19 FD is: 2 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7505 Wilshire Rd.
(Principal office address MUST BE A STREET ADDRESS)	Pensacola, FL 32526
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin 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 wit, 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 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, enter the title, name, and address of each person being: or removed from our records: MGR = Manager AMBR = Authorized Member **Address Title** <u>Name</u> Type of Actic Nicole L. Symmes 7505 Wilshire Rd. DAdd

Pensacola, FC 32526 DRemove Change _□ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove □ Change □ Add ☐ Remove _□ Change □ Add □ Remove

☐ Change

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Note: If the	ate, if other than the date of filing:
the record The 90ti	specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier oh day after the record is filed.
Dated	Signatury of a member or authorized representative of a member
_	Donya Kim Cheveland Typed or printed name of signee

D. If amending any other information, enter enange(s) here: (Attach diatitional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00