# L18000045097

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (nuuless)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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MAR O 6 2018

#### **COVER LETTER**

| SUBJECT: EXQUISTE CLEAN 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:   |
| Dajour l Neufille<br>Name of Person   |
| EXQUISTE CLEAVLLC   |
| 512 Clemson Dr  |
| Altamonte Springs, FL, 32714  City/State and Zip Code  dajourneu Fri. Ite gmail. com  |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Dajour Neufville at (3417) H44-3194  Area Code Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee Certificate of Status  Certificate of Status & Certificate of Stat |

#### MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

EXQUESTE CLEAN 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 Cor<br>Florida document number 18000048097  | mpany were filed on February 22 | 2018 and assigned            |
| This amendment is submitted to amend the following:   |                                 |                              |
| A. If amending name, enter the new name of the limite  L X Q J T S T E  The new name must be distinguishable and contain the words "Limite" | CLEAN LL                        | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |                                 |                              |
| (Principal office address MUST BE A STREET ADDRE  | (SS)                            |                              |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)   |                                 |                              |
| B. If amending the registered agent and/or register<br>registered agent and/or the new registered office address                            |                                 | enter the name of the new    |
| Name of New Registered Agent:   |                                 | Tiel (R)                     |
| New Registered Office Address:  |                                 |                              |
|   | Enter Florida street address    | 9 m F                        |
|   | , Flor                          |                              |
|   | 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 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 added or removed from our records:

| MGR = Manager AMBR = Authorized Member |          |              |                |  |
|--|----------|--------------|----------------|--|
| <u>Title</u>                           | Name     | Address      | Type of Action |  |
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|  |          |              | Change         |  |
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|  |          |              | □ Remove       |  |
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|  |          |              | ☐ Remove       |  |
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| Effective date, if other the (If an effective date is listed, the Note: If the date inserted in document's effective date of | date must be specific and can<br>n this block does not mee | t the applicable statute | ling or more than 90 days a           | <b>ptional)</b><br>ifter filing.) Pursi<br>this date will n | uant to 605.020<br>not be listed a | 07 (3)(b)<br>is the     |
| the record specifies a d<br>The 90th day after t   |  | e, but not an effe       | ctive time, at 12:0                   | 1 a.m. on th  | ne earlier d                       | of:                     |
| Dated March 2  | ond/2018.  | ·                        |                                       |   |                                    |                         |
| _ Ju   | Signature of a men   | nber or authorized repre | sentative of a member                 |   |                                    |                         |
| 7  | ) a l our  | Neuf                     | Me                                    |   |                                    |                         |

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Filing Fee: \$25.00