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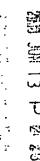
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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JUN 2 5 2019 T. LEWEUX

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		aundry LLC		
e de la composición della comp		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	unitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		William Pederson		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		Freedom Laundry LLC		
			Firm/Company	
		5464 N University Dr		
			Address	
		Lauderhill, FL 33351		
		main@clgwash.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For further in	nformation c	oncerning this matter, please ca	all:	
William Ped	erson		954 397-3721 at ()	
· -	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$ 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:

TO:

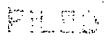
Registration Section

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



Freedom Laundry LLC

(Name of the Limited Liability Company as it now appears on our receives) Fig. 13 P 2: 25

The Articles of Organization for this Limited Liability Company were filed on 03/12/2018 (ALEATON AND and assigned
Florida document number 1.180000063280
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 "LLC."
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
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 a	dded
or removed from our records:	

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Elena Pederson	7426 NW 113th Ave Parkland FL, 33076	■ Add
			Remove
	Rudolf V Boquiron	401 SW 158th Ter, Apt 104	Change
AMBR		Pembroke Pines, F1, 33027	Add
			□ Remove
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Effective date, if other than the	6-15-2019 he date of filing: (optional)	
(If an effective date is listed, the date n	nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 block does not meet the applicable statutory filing requirements, this date will not be list)5.0207 (ted as t
he record specifies a delay The 90th day after the re	ed effective date, but not an effective time, at 12:01 a.m. on the earli ecord is filed.	ier of:
Dated	2019	
Wil ?	Signature of a member or authorized representative of a member	
V -	organizate or a member of authorized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00