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TO: Registration Section Division of Corporations

SUBJECT:

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Orlando Pressure Washing

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:

David S Messier

Name of Person

Orlando Pressure Washing

Firm/Company

860 Menton Rd

Address

Pierson, FL 32180

City/State and Zip Code

dsmessier@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David S Messier

Name of Person

_ at (_____) Area Code Davtime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing 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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 APR -1 04 4:56 Orlando Pressure Washing, LLC (<u>Name of the Limited Liability Company as it now appears on our records.</u>), (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{3/23/2018}{2}$ _ and assigned Florida document number 118000075367 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Patriot Pressure Washing and Sealing, L.L.C The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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

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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

_. Florida ___

Zip Code

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

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than the date of (If an effective date is listed, the date must be specif <u>Note:</u> If the date inserted in this block does document's effective date on the Departmen	not meet the app it of State's record	icable statutory filing requi		
the record specifies a delayed effective date, bu cord is filed.	n not an effective	time, at 12:01 a.m. on the	earner of: (b) The 90th da	ay after the
Dated March 25	2024	·		
David S Messier		Digitally signed by Dav Date: 2024.03.25 13:40 borized representative of a me):35 -04'00'	
Signature	- na a memaner or an			
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