L18000077640

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corporations						
	Easy Clean	Laundry "LLC"				
SUBJECT:		Name of Limi	ited Liability Company			
The analogue	d Articlas of	Amendment and fec(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Nicholas Trabulsy				
			Name of Person			
			Firm/Company			
		205 Heron Bay Circle				
			Address			
		Lake Mary, FL 32746				
			City/State and Zip Code			
		nıntnick@gmail.com	to be used for future annual report no	tification)		
For further i	nformation c	oncerning this matter, please of				
Nick Trabul	lsy		407 468-5030			
Name of Person		Area Code Dayti	me Telephone Number			
Enclosed is	a check for th	ne following amount:				
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	ailing Addres		Street Address: Registration S	ection		
	gistration (vision of C	Section Corporations	Division of Corporations			
	O. Box 632	•	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ART	CLES OF O	F F	喜利
			The state of
Easy Clean Laundry LLC			
		ny as it now appears on our liability Company)	records.) and assigned
The Articles of Organization for this Limited L	iability Company	were filed on 11-19-20	and assigned
Florida document number L18000077640			77
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
Face Vanding 1 C			The state of the s
The new name must be distinguishable and contain the v	vords "Limited Liabi		
Enter new principal offices address, if applic	able:	4300 W Lake Mary Blv	<u>'d</u>
(Principal office address MUST BE A STREE		Suite 1010-105	
Trincipal office saurem in the		Lake Mary, FL 32746	
		205 Heron Bay Circle	
Enter new mailing address, if applicable:		Lake Mary, FL 32746	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	Lake Mary, FL 32740	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ss here:	address on our records	, enter the name of the new registered
Name of New Registered Agent:	Nick Trabulsy		
New Registered Office Address:	205 Heron Bay	y Circle	
THEM INDESTRUCTED STREET SEE		Enter Florida stre	
	Lake Mary		
		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.

f Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member				
	MCD -	Managar		
AMRD = Authorized Member	MGK -	Manager		
	AMBR :	- Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□ Add
			□Remove
			□Add
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ective date, if other than the effective date is listed, the date mute: If the date inserted in this burnent's effective date on the I	lock does not me	et the applicab				ant to 605.020 of be listed a
cord specifies a delayed effecti s filed.	e date, but not a	n effective time	e, at 12:01 a.m.	on the carlier o	f: (b) The 90th	day after th
ed		2021				
			. •			
Duch	Signature of a me	Member or authori	zed representative	of a member		