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## **COVER LETTER**

	istration Sect ision of Corpo			10 19.00
	·			Go State
SUBJECT:	Tenacity Tras			3
000000			ited Liability Company	The state of the s
				الم الم
The enclosed	l Articles of Ar	mendment and fee(s) are sub	mitted for filing.	10 OCS MA 9.25
Please return	all correspond	lence concerning this matter	to the following:	
	•	S	C	
		Tyrone Bost		
			Name of Person	
		Tenacity Cleaning Service	s, LLC	
		<del></del>	Firm/Company	
		6992-2 Merrill Rd. Suite.	42	
			Address	
		Jacksonville/ Florida, 3227	7	
			City/State and Zip Code	
		Tyronebost@hotmail.com	Chysuic and 24p code	
		E-mail address: (	to be used for future annual report notification)	
For further in	iformation con	cerning this matter, please c	all:	
Tyrone Bost			917 293-6784	
	Name of P	ngan	at () Area Code Daytime Telephone Number	
	Name of F	cison	Area Code Daytime Telephone Number	
Enclosed is a	check for the	following amount:		
		-		er en
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Fi Certified Copy Certifica	ling Fee. te of Status &
			(additional copy is enclosed) Certified (additional	Copy copy is enclosed)
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	rision of Cor D. Box 6327	porations	Division of Corporations The Centre of Tallahassee	
		22214		10
1 21	lahassee, FL	, 34314	2415 N. Monroe Street, Suite 8	IV

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	TO	
	ORGANIZATION	Jan Jak
	OF	
Tenacity Trash, LLC		ecords.) and assigned
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our r	ecords.)
(A Florida Limited	I Liability Company)	<u>۾'</u>
The Articles of Organization for this Limited Liability Compan	y were filed on 12/18/2019	and assigned
lorida document number L18000099267		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Tenacity Cleaning Services, LLC		
he new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<del>-</del>
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		
Mailing address MAY BE A POST OFFICE BOX)	<del></del>	<del></del>
	• •	<u> </u>
3. If amending the registered agent and/or registered office	e address on our records le	nter the name of the new registere
gent and/or the new registered office address here:	. addiess on our records, <u>c</u>	ater the name of the new registere
Name of New Registered Agent:		
Non Paris and Office Address.		
New Registered Office Address:	Enter Florida street a	ddress
		EN . N.I
<del></del>	City	, Florida
New Registered Agent's Signature, if changing Registered Agen	t:	·
I hereby accept the appointment as registered agent and agorovisions of all statutes relative to the proper and complet		
accept the obligations of my position as registered agent as		
being filed to merely reflect a change in the registered offic	•	· ·
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>	<u>Name</u>	Address	Type of Action
AMBR	Juse Valazques Velazquez	6992-2 Merrill Rd. Suite. 142	■Add
		Jacksonville, Florida 32277	□Remove
			□Change
AMBR	Jose E Velazquez Jr.	<del> </del>	□Add
			□Remove
		<del> </del>	□Change
		<del></del>	□ Add
			□Remove
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