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	(Address)	
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SECRETARY OF STATE

AUG 2 4 2018 T SCHROEDER

COVER LETTER

TO: Registration Se Division of Cor			
	A'S PRESS AND WASHER!	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	MARIA D GARCIA		
	HERRERA'S PRESS AN	Name of Person ND WASHER LLC	
	5306 BONEFISH ST	Firm/Company	
	ORLANDO. FL 32812	Address	
	MARICOL3@YAHOO.ES	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	oncerning this matter, please ca	all:	
MARIA D GARCIA		407 2729942 at ()	
Name o	f Person		Telephone Number
Enclosed is a check for th	ne 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 of Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

HERRERA'S PRESS AND WASHER, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limit	mpany as it now appears on our recorted Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Compa	any were filed on 05/03/2018	and assigned
Florida document number L18000111920		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
HERRERA'S PRESSURE WASH, LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		7
Principal office address MUST BE A STREET ADDRESS	<u> </u>	□ 16
		100 TI
		20
Enter new mailing address, if applicable:		लिंद 🗷 📆
(Mailing address MAY BE A POST OFFICE BOX)		18 2 D
Willing Hadress MAT BE AT 651 OFFICE BOX		2
	·	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ds, <u>enter the name of the ne</u>
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addre	
_	F	lorida
	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 or removed	Authorized Person(s) authorized to from our records:	manage, <u>enter the title, name, a</u>	nd address of each person being adde
MGR:= M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Remove
			Change
<u>-</u>			Add
			□ Remove
			Change
			Add SE 6
			Remove Re
			- CORE - A22
			□ Remove
			□ Change
 		-	Add
		-	☐ Remove
			□ Change
			Add
			☐ Remove
			☐ Change
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If amending any other information, enter change(s) here	: (Attach additional sheets, if necessary.)
	
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	FLOST ST. C
	STATE LORIDA
	30, D
08/14/2018	
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicated document's effective date on the Department of State's records.	(optional) to date of filing or more than 90 days after filing.) Pursuant to 605.0207 tible statutory filing requirements, this date will not be listed as
·	
he record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of
AUGUST 14TH 2018	
Dated 7	-
May bours	
Signature of a member or autho	rized representative of a member
MARIA D GARCIA	
MAKIA D GARCIA	t .
	d name of signee
	d name of signee
Typed or printed	d name of signee 3 of 3