L18000129814

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Na	me)
(De	cument Number)	
(DC	cument Number,	1
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:		SURE WASH & SEALER LL	C	•
SOBJECT.		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Christopher D Smith		
			Name of Person	
		SmithLaw		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		5391 Lakewood Ranch Bl	vd N 203	
			Address	
		Sarasota, FL 34240		
			City/State and Zip Code	
		smith@chrissmith.com		
			to be used for future annual rep	oort notification)
For further i	nformation c	oncerning this matter, please c		
Christopher	Smith		941 202-2 at ()	
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is	a check for th	ne following amount:		
里 \$25,00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	uiling Addres		Street Add Registrati	ress: on Section
	_	Section Corporations	Division :	of Corporations
	O. Box 632	-	The Cent	re of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L18000129814	Company were filed on 5/24/2018	and assigned
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lin	mited liability company here:	
DC2 PRESSURE WASH & SEALER LLC		
he new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	DRESS)	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or register gent and/or the new registered office address here 		name of the new regi
gent and/or the new registered office address here	•	(- ')
		t>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a
	City	Zip Coide

New Registered Agent's Signature, if changing Registered Agent:

CO2 PRESSURE WASH & SEALER LLC

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			DAdd
			□Remove
			Change
			□Add
			□Remove
			\ \ \ \ _Add
			□Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

ii aiii	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
•	
•	
If an ef Note:	fective date, if other than the date of filing:
rd is f	
Datas	August 11 2021
Dated	
	1 Amb Cago
	Stepartire of a member or authorized representative of a member
	•

Filing Fee: \$25.00