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(Re	equestor's Name)	
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Y SULKER NOV 27 2019



October 23, 2019

EPIC PRESSURE CLEANING LLC 2225 W HOLDEN AVE #101 ORLANDO, FL 32839

SUBJECT: EPIC PRESSURE CLEANING LLC

Ref. Number: L18000155478

We have received your document for EPIC PRESSURE CLEANING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not have more than one Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 819A00021834

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Lin</u>	nited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Florida document number L18000155478	Liability Company were filed on 00	6/25/2018 and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company h	nere:
EPIC ENTITIES, LLC		
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli Principal office address MUST BE A STRE		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		ZOIS HOV 25 SECHETARY TALLAHASSEE
3. If amending the registered agent and registered agent and/or the new registered of		n our records, enter the name top the n
Name of New Registered Agent:	CHRISTOPHER DOYLE	
New Registered Office Address:	2225 W HOLDEN AVENUE 10)!
	Enter Flo	vida strvet address
	ÓRLANDÓ	, Florida 32839
,	Lift	Zin Code

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

EPIC PRESSURE CLEANING 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
AMBR	CHRISTOPHER DOYLE	2225 W.HOLDEN AVE #101 ORLANDO F1. 32839	■ Add
			□ Remove
			☐ Change
AMBR MICHAEL MILLER		2225 W.HOLDEN AVE #101 ORLANDO FL 32839	BAdd
			☐ Remove
			☐ Change
AMBR	STARKS , IDA E	2225 W HOLDEN AVE #101 ORLANDO FL 32839	Add
			Remove
			□ Change
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Effective date, if other than the fan effective date is listed, the date in Sote: If the date inserted in this locument's effective date on the	nust be specific an block does not	id cannot be prior meet the applic	to date of filing or able statutory fili	more than 90 days aft	er filing.) Pursuant to 60	
e record specifies a delay The 90th day after the re			t an effective	time, at 12:01	a.m. on the ear	lier of:
Dated October 02		2019				
Oliva Dada	1 Dm	1,		e of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00