(Requestor's Name) (Address) (Address)	600332708146
(City/State/Zip/Phone #)	08/15/1901014013 ** 25.
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	19 SEP -9 PH 4:59 MALLAHASSEE, FLORIDA
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2019

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DANIELLE CABAN A-1 SOFTWASH PRESSURE CLEANING LLC 1931 SW 23RD TERRACE FORT LAUDERDALE, FL 33312

SUBJECT: A-1 SOFTWASH PRESSURE CLEANING LLC Ref. Number: L18000164949

We have received your document for A-1 SOFTWASH 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):

The registered agent must sign accepting the designation.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 419A00017741

81 2 Hd 6- 435 6102

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations

A-1 SOFTWASH PRESSURE CLEANING LLC

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SUBJECT: ______ Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIELLE CABAN

Name of Person

A-1 SOFTWASH PRESSURE CLEANING LLC

Firm/Company

1931 SW 23RD TERRACE

Address

FORT LAUDERDALE, FL 33312

City/State and Zip Code

A1SOFTWASH@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANIELLE CABAN 954 305-2756 at (_____) _____ Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the 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 & 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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A-1 SOFTWASH PRESSURE CLEANING LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed or	07/09/2018	and assigned
L 1800016 40 40		

Florida document number L18000164949

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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 applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

	≥倍 5
	ALL SEP
no address on our records a	59 59

B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here:

Name of New Registered Agent:	DANIELLE CABAN	
New Registered Office Address:	1931 SW 23RD TERRACE	
	Enter Floria	la street address
	FORT LAUDERDALE	, Florida ³³³¹²
	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
		1931 SW 23RD TERRACE Fort lauderdale, FL 33312	🖬 Add
	······································	2804 SW 16TH STREET FORT LAUDERDALE, FL 33312	■ Remove
	FELIX CABAN		Change
<u></u>	·		Add
			Remove
	DANIELLE CLARKE		Change
			Add
DANIELLE CABAN		Remove	
		🖸 Change	
			🖬 Add
			Remove
			Change
			O Add
	<u> </u>	Remove	
			Change
			🗖 Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

08/12/2019	
	_
Signature of a member or authorized representative of a member	
DANIELLE CABAN	—
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00