## 118000182475

(Re	questor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration So Division of Cor			
	Pressure Cleaning & Washing	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	ondence concerning this matter	to the following:	
	AURA MONROY		
		Name of Person	
	Blue Wave Pressure Clean	ing & Washing LLC	
	·····	Firm/Company	
	4972 Neros Drive		
		Address	
	Lake Worth, Florida 33463		
	sellitti4@aol.com	City/State and Zip Code	
For further information of	E-mail address: (to concerning this matter, please ea	to be used for future annual report noti	fication)
Michael Sellitti		561 2811357 at ()	
Name o	f Person		e Telephone Number
Enclosed is a check for the	he 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)
<u>Mailing Addres</u> Registration !		<u>Street Address:</u> Registration Sec	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 632	P.O. Box 6327 The Centre of Tallahassee		allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 

2020 AU : 25 FH 6: 25

Blue Wave Pressure Cleaning & V	*	inv as it now appears on	our records.)
,	(A Florida Limited	iny as it now appears on Liability Company)	,
The Articles of Organization for this Limited I	Liability Company	were filed on $\frac{07/30/3}{2}$	2018 and assigned
Florida document number L18000182475			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	vility company here:	
Aqua Wave Pressure Cleaning & Window Washi	ng LLC		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		4972 Neros Drive	
(Principal office address MUST BE A STRE	ET ADDRESS)	Lake Worth, Florida, 33463	
Enter new mailing address, if applicable:		4972 Neros Drive	
(Mailing address MAY BE A POST OFFICE BOX)		Lake Worth, Florida, 33463	
B. If amending the registered agent and/or		address on our reco	rds, enter the name of the new registered
agent and/or the new registered office address	ess here:		
Name of New Registered Agent:	Louis Sellitti		
New Registered Office Address:	4972 Neros Dri	ive	
ivew registered vittee Address.	Enter Florida street address		
	Lake Worth		, Florida 33463
	-	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the	per and complete sistered agent as p	performance of my provided for in Cha	duties, and I am familiar with and peer 605, F.S. Or, if this document is

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Sellitti	4972 Neros Drive Lake Worth, Florida. 33463	\equiv \equiv Add
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CCCAlice data CC.Alice Alice Alice d	Date of filing	
Effective date, if other than the date must be	specific and cannot be prior to date of filing or more than 9	(optional) 0 days after tiling ) Pursuant to 608 0207 (
Note: If the date inserted in this block	does not meet the applicable statutory filing require	ments, this date will not be listed as the
document's effective date on the Depa	tment of State's records.	
e record specifies a delayed effective c	ite, but not an effective time, at 12:01 a.m. on the ea	rlier of: (b) The 90th day after the
rd is filed.		
AUGUST 8th	2020	
Dated AUGUST 8th	~~~	
and the contract of the contra	nature of a member or authorized representative of a mem  AURA MONROY  Typed or printed name of signee	
Śi	nature of a member or authorized representative of a mem	her
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Filing Fee: \$25.00