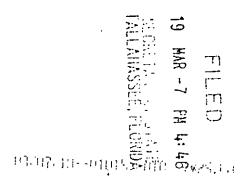
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(R	Requestor's Name)
(A	Address)
(A	Address)
(Č	City/State/Zip/Phone #)
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(Document Number)	
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MAR 1 6 2019 S. YOUNG

COVER LETTER

TO: - Registration Sec Division of Corp		• .	•
SUBJECT: AFFE	PRDABLE IR Name of Lim	ASH REMOVAL ited Liability Company	LLC
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	TREVOR	BUNKAJ Name of Person	
	AFFORDABLE	E TRASH REMO	NAL LLC
	1946 SW 63r	dTER.	
	NORTH LAU	O'ERDALE FL City/State and Zip Code	33068
	all compact	City/State and Zip Code	γ_1
	E-mail address: (HOgmail. Cor	cation)
For further information co	ncerning this matter, please ca	all:	
TREVOR BL	INRAJ	at (<u>984</u>) <u>646</u> Area Code Daytime	- 1889
Name of	Person	Area Coue Daytime	retepnone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	S30.00 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:

TO:

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

AFFORDABLE TRASH	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 18000 25 4535</u>	were filed on $\frac{10/30/2018}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabile A FFORDABLE TRASH R The new name must be distinguishable and contain the words "Limited Liabili"	ty 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)	1946 SW 63rd Ter. North Landerclake FL 33068.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1946 SW 63vel Ter North Landerdate Fl 33068.
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent: TREVO New Registered Office Address: 1946 S Nwth	R BUNRA-J W 63 yel TU Enter Florida street address Lauele dole, Florida 330 by City Enter Code
New Registered Agent's Signature, if changing Registered Agent:	WAR TI
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pa- being filed to merely reflect a change in the registered office of	performance of my duties, and I am familiar with and I rowided for in Chapter 605, F.S. Or, if [His doctionent-is

company has been notified in writing of this change.

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>	Name	Address	Type of Action
MGR	TREVOR BUNRAJ	1946 SW 63rd TER, N.L FL	339 6 K
			☐ Remove
			Change
			Add
			🗆 Remove
			Change
			□ Add
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			□ Remove
			Change

	EIN. Number - 47-4178316
Note:	tive date, if other than the date of filing:
b) Th	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	March 3rd 2019 Timor Burrey. Signature of a member or authorized representative of a member
	Jimor Dunrey.
	Significate of a member of authorized representative of a member
	TREVOR BUNKAJ Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00