

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Decisions Facility Manus)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
openial instructions to 1 imig officer.

Office Use Only



600330391856

06/12/19--01002--006 ++25.00

2019 JUN 12 NH AT 34

Y SIJLKER JUN 24 2019

COVER LETTER

TO: Registration So Division of Co								
	SSURE WASHING PROFESSI	ONALS LLC						
Name of Limited 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:						
	James Fuglaar							
		Name of Person						
	The Pressure	e washing frof	ervionels					
	1216 E17th Ave	FirmCompany						
		Address						
	Tampa/FL/33605							
	jesusrock6454@gmail.com	City/State and Zip Code						
		to be used for future annual report noti	fication)					
	concerning this matter, please ca							
James Fuglaar Name o	of Person	813 720-6382 at () Area Code Daytim	e Telephone Number					
Enclosed is a check for t	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					

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE PRESSURE WASHING PROFESSIONALS LLC

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

(A Piorida Limite	ed Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L19000014969</u>	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited li	ted to amend the following: ter the new name of the limited liability company here: ishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." tes address, if applicable: iss, if applicable: 235 W Brandon Blvd Suit 329 Brandon FL 33519 iss, if applicable: EA POST OFFICE BOX) gistered agent and/or registered office address on our records, enter the name of the new he new registered office address here:
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1216 E 17th Ave Tampa FL 33605
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address be	office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	James Fuglaar	1216 E 17th Ave Tampa FL 33605	= Add
			□ Remove
			Change
CEO_	GARRETT GUGLARAR	11207 DEHBLEY KANDIN	X M □ Add
		117HIA FL 33547	Remove
		 	Change
AP	KAFLYN FUGLARR	11207 DENBLEY LANDA	K DR I Add
		11741A F 33547	Remove
			Signal Figure 1
			Remove
			Hange Hange
		::	ω Δ Δ Δ
			Remove
			Change
			Remove
			Change

				
			<u> </u>	
				
				
				
				
			200	
			25	<u> </u>
				<u>₹</u> 1
			Ą	2
			1 1 1 1 1 1 1 1	<u>မှ</u>
ective date, if other than the d	ate of filing:		(optional)	
n effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	e specific and cannot be prior to d k does not meet the applicable	ate of filing or more than 90 statutory filing requirer) days after filing.) Pur nents, this date will	suant to 605.020' not be listed as
record specifies a delayed e The 90th day after the recor	effective date, but not a d is filed.	n effective time, at	12:01 a.m. on	the earlier o
ted 11th June	2019			
<i>\begin{align*} \begin{align*} \begi</i>	10			
Jay	gnature of a member or authorize			
- 	gnature of a member or authorize	a representative of a memo	JC1	

Page 3 of 3

Filing Fee: \$25.00