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## **COVER LETTER**

**Division of Corporations** Under Pressure Auto Detailing, LLC 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: James Diefenderfer Name of Person Under Pressure Auto Detailing, LLC Firm/Company 1457 SE Buckingham Terrace Address Port Saint Lucie, Florida 34952 City/State and Zip Code James.Diefenderfer88@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James Diefenderfer Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ■ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:** 

TO:

Registration Section

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

(Name of the Limited Liability Company as it	
(Name of the Limited Liability Company as it (A Florida Limited Liability	: now appears on our records.) / Company)
The Articles of Organization for this Limited Liability Company were f	filed on 03/15/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liability co</u>	ompany here:
HydroSoak Cleaning Services, LLC	<del></del>
The new name must be distinguishable and contain the words "Limited Liability Com	npany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	7
	\$2. <b>28</b>
Enter new mailing address, if applicable:	me a m
Mailing address MAY BE A POST OFFICE BOX)	S 9 ( )
Truming address militable in the interest of the bond	
B. If amending the registered agent and/or registered office acregistered agent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our records, enter the name of the
New Registered Office Address:	
	Enter Florida street address
	, Florida
	ty Zip Code
Cin New Registered Agent's Signature, if changing Registered Agent:	

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
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Plea	se note; Only the companies name has changed. All other i	information is correct.	_
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	04/05/2019		
E. Effective	date, if other than the date of filing:	(optional)	5 020
Note: If t	he date inserted in this block does not meet the applicable s	statutory filing requirements, this date will not be list	ted as
document	s effective date on the Department of State's records.		
	d specifies a delayed effective date, but not an the thick the record is filed.	effective time, at 12:01 a.m. on the earli	er o
Dated Ma	rch 22nd , 2019		
	) amea Didwardy Signature of a member or authorized	representative of a member	
		•	
	James Diefenderfer		

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Filing Fee: \$25.00