L19000129548

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Amend

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COVER LETTER

TO:	Registration Se Division of Cor		,	
/14 1 T D 4 T	FRESHER	LLC		
SUBJE	ECI:	Name of Limi	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are subi	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Jared S Backus		
			Name of Person	
		Fresher LLC		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		13700 Sutton Park Dr N	#1335	
			Address	
		Jacksonville/Florida 3222	24	
		jared@fresherpressurewa	City/State and Zip Code ashing.com	
		E-mail address: (t	o be used for future annual report notific	cation)
For fur	rther information c	oncerning this matter, please ca	ill:	
Jared	S Backus		580 3638344 at ()	
	Name o	f Person	Area Code Daytime	Felephone Number
Enclos	ed-is-a check for th	ne following-amount:		
≣ \$2:	5.00 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

FRESHER LLC	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on May Florida document number L19000129548	13th, 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	
he new name must be distinguishable and contain the words "Limited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	7.0
	:
Inter new mailing address, if applicable:	<i>ٺ</i>
Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
3. If amending the registered agent and/or registered office address on o egistered agent and/or the new registered office address here:	our records, <u>enter the name of the</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida	a 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
AMBR	Jared S Backus	13700 Sutton Park Dr N #1335 Jacksonville, FL 32224	A dd
			Remove
			Change
			□ Add
			Remove
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ffective date, if other an effective date is listed	l, the date must be specif	fic and cannot be prior	to date of filing or mo	(optional) te than 90 days after filing.) P	ursuant to 605,0201
lote: If the date insert ocument's effective d	ted in this block does	not meet the applica	able statutory filing	requirements, this date wi	Il not be listed as
ocument's criccitie a	are on the trepartmen	tor state s records.			
e record specifies The 90th day aft			t an effective tir	ne, at 12:01 a.m. or	the earlier o
May 24th		2019			
May 24th			·		
		1			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00