6/21/2019

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001939373)))



Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062

: (323)962-8600 Phone Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GO-BRITE PRESSURE CLEANING LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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Electronic Filing Menu Corporate Filing Menu

TO: Registration Section

To: Page 3 of 6

COVER LETTER

Division of Co	rporations		
GÖ-BRI'	TE PRESSURE CLEANING	LLC	
SUBJECT:	Name of Lim	ited Liability Company	,
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	~;
	Cheyenne Moseley		;
		Name of Person	-
	Legalzoom.com, Inc.		. >
		Firm/Company	.)
	101 N. Brand Blvd., 11t	h Floor	- ,
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	sxv219@case.edu		
		to be used for fature annual report noti	ication)
For further information	concerning this matter, please c	all:	
Cheyenne Moseley		800 773-0888 e	nt. 9724
Name	of Person	at ()at ()	Telephone Number
Enclosed is a check for	the 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)
Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clitton Building 2661 Executive Ce	n ations

Tallahassee, FL 32301

2019/06/10 13:34:07 2 /3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it pow appears un our records.)

Losture. Labrini 1 A.)	arphdy Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/17/2019	and assigned
Florida document number 1.19000133705		i.
This amendment is submitted to amend the following:		(注 (A.)
A. If amending name, enter the new name of the limited liah	lity company here:	
Outdoor HomEnhancers LLC		>
The new name must be distinguishable and end with the words "Limited Liah	lity Company," the designation "LLC"	or the abbreviation "L L.C."
Enter new principal offices address, if applicable:	510 Old Bluff Dr	· ·
(Principal office address MUST BE A STREET ADDRESS)	Ponte Vedra, FL 32081	
Enter new mailing address, if applicable:	510 Old Bluff Dr	
Mailing oddress MAY BE A POST OFFICE BOX	Ponte Vedra, FL 3208!	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the ne
New Registered Office Address:	Enter Florida street address	
	. Flori	d.

New Registered Agent's Signature, if changing Registered Agent:

GO-BRITE PRESSURE CLEANING LLC

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Кепкуе
			Add
			☐ Remove
			Add
			□ Remove
			□ Add
			Remove
			□ Add
			Remove
			☐ Remove

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Gailey to read as follows:		
10 Old Bluff Dr., Ponte	Vedra, FL 32081	· · · · · ·
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tive date, if other than the fective date must be specific, cannote this document is filed by the Fic	of be prior to date of receipt or filed date and cannot be more the	(optional) an 90 days after
fective date must be specific, cann	of be prior to date of receipt or filed date and cannot be more the	(optional) on 90 days after
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