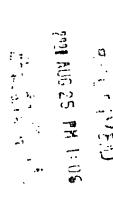
# 119000209170

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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C. GOLDEN AUG 2 6 2020

### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 08/24/2020	**WALK II
ENTITY NAME WALKER	R PRESHER WASHING L.L.C.
DOCUMENT NUMBER	
	**PLEASE FILE THE ATTACHED AND RETURN**
XXXX	Plain Copy
	NUMBER  **PLEASE FILE THE ATTACHED AND RETURN**  Plain Copy Cercificate of Status  **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Cercificate of Good Standing  **APOSTILLE' / NOTARIAL CERTIFICATION**  F DESTINATION CERTIFICATES REQUESTED
	Certificate of Status
	• • • •
	**APOSTILLE' / NOTARIAL CERTIFICATION**
COUNTRY OF DESTINATI	TON
NUMBER OF CERTIFICAT	TES REQUESTED
TOTAL OWED \$25.00	ACCOUNT #: 120160000072
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Donas and Time at the	
I beuse out I mu ut the	e above hamber for any issues or concerns. I want you so much:

### **COVER LETTER**

TO:

Registration Section

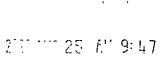
Tallahassee, FL 32314

Div	ision of Cor	porations		
	WALKER I	PRESSURE WASHING L.L.C		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter	_	
	•	2	C	
		Megan Fuentes		
			Name of Person	
		ZenBusiness PBC		
			Firm/Company	
		5900 Balcones Dr. Suite 50	000	
			Address	
		Austin, Texas, 78731		
			City/State and Zip Code	<del></del>
		fulfillment@zenbusiness.co		
			to be used for future annual report no	otification)
For further in	nformation c	oncerning this matter, please co	all:	
Megan Fuen	tes		844 493-6249 at () Area Code Dayti	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	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)
	iling Addres gistration S		Street Address: Registration S	Section
•	_	orporations	Division of Co	
	). Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



WALKER PRESSURE WASHING L.L.C.

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

(A Florida Littlica I	Liaonity Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000209170</u> .	were filed on 08/16/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13289 77th Pl N	
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, FL 33	3412
Enter new mailing address, if applicable:	13289 77th Pl N	
(Mailing address MAY BE A POST OFFICE BOX)	West Palm Beach, FL 32	3412
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records,	enter the name of the new registered
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 agre	ee to act in this capacity	v. 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 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	SHANE R WALKER	13289 77th Pl N	
		West Palm Beach, FL 33412	□Remove
			<b>■</b> Change
			□ Add
			□Remove
		<del> </del>	□Change
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			□Change
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ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this blocument's effective date on the Defective date.	t be specific and cannot be pri- ock does not meet the appl	or to date of filing or mor icable statutory filing		ing.) Pursuant to 605.020
record specifies a delayed effectiv is filed.	e date, but not an effective	time, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
August 24	2020			
/s/ SHANE R WAL	KER			
/s/ SHANE R WAL	KER Signature of a member or au	thorized representative o	f a member	

Filing Fee: \$25.00