L19000210847

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nar	me)
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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07/30/21--01011--008 **30.00

8/12/012

COVER LETTER

	tion Section of Corporation	ons		•
SUBJECT:	= XCEL	PRESSURE !	JASHING LLC ited Liability Company	<u> </u>
		Name of Lim	ited Liability Company	
The enclosed Artic	cles of Ameno	lment and fee(s) are sub	mitted for filing.	
Please return all co	orrespondence	concerning this matter	to the following:	
		TIMOTHY	LENEUE	
			Name of Person	
		EXCEL P	RESSURE LASHT	NG LLC
		• 100	Firm/Company	
	_	9970 9970	DATLY AVE	
	_	PALM BEACI	City/State and Zip Code	33410
		EXCEL PROGET	ERTY SERVICES FLO to be used for future annual repor	@ GMATC. Com t notification)
For further inform	ation concern	ing this matter, please c	all:	
	HY LEN	1 EVÉ	at (56) // 12	7-3070
	Name of Person	n	Area Code Da	aytime Telephone Number
Enclosed is a chec	ck for the folk	owing 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXCEL PRESSURE		
(Name of the Limited Liability (A Florida	y Company as it now appears of Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Co Florida document number <u>LJ900210847</u>	ompany were filed on	8/19/2019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here	;
EXCEL PROPERTY SERV The new name must be distinguishable and contain the words "Limit	ICES LLC	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR.	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our rec	ords, enter the name of the new registered
agent and/or the new registered office address here.		
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 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
			□Add
			□Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□ Remove
			□Change
		□Add	
			□Remove
			☐ Change
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		Remove	
			□Change
		□Add	
			□Remove
			□Change

Effective date. if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605 0207 Note: If the date inserted in this block does not meet the applicable statutory filine requirements, this date will not be inseed as document's effective date on the Department of State's records. The effective date on the Department of State is records. Dated TULY LATE Signature of a member or authorized representative of a member TIMOTHY LENEVE		
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Signature of a member or authorized representative of a member		
	Dated _	JULY 26th 2021
		Signature of a member or authorized representative of a member

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