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| (Requestor's Name) |
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| (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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Office Use Only



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COVER LETTER

| BOULAY SUBJECT: | PRESSURE WASHING LLC | | |
|----------------------------|---|---|---|
| SUBJECT: | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | STEVEN BOULAY | | |
| | BOULAY PRESSURE W. | Name of Person ASHING LLC | |
| | 1913 DISCOVERY LOOP | Firm/Company | |
| | PANAMA CITY FL 3240: | Address | |
| | STEVENBOULAY1979@0 | City/State and Zip Code GMAIL.COM | |
| | E-mail address: (| to be used for future annual report notif | ication) |
| For further information of | concerning this matter, please co | ill: | |
| STEVEN BOULAY | | 850 596-8898 at () | |
| Name (| of Person | Area Code Daytime | e Telephone Number |
| Enclosed is a check for t | he following amount | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed) | □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclose |

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

| BOULAY PRESSURE WASHING ELC | 00T |
|---|--|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited) | iny as it now appears on our records.) Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number 1.19000226807 This amendment is submitted to amend the following: | - 11 |
| A. If amending name, enter the new name of the limited liab | ility company here: |
| CURB APPEAL SOFTWASHING LLC | |
| The new name must be distinguishable and contain the words "Limited Liabi | hty Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 2509 E 39TH PLZ |
| (Principal office address MUST BE A STREET ADDRESS) | PANAMA CITY FL 32405 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1913 DISCOVERY LOOP PANAMA CITY FL 32405 |
| B. If amending the registered agent and/or registered of 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 |
|--------------|---------------|---|----------------|
| OWNER | STEVEN BOULAY | 1913 DISCOVERY LOOP PANAMA CITY FL 32405 | ■ Add |
| | | | Remove |
| | | | Change |
| VP | JOSHUA BOULAY | 2509 E 39TH PLZ PANAMA CITY FL 32405 | Add |
| | | | ■ Remove |
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| Effect | tive date, if other than the fective date is listed, the date mus | | 09/24/2019 | | (optional) | |
| NOIC: | Tective date is listed, the date must If the date inserted in this bluent's effective date on the D | ock does not mee | it the applicable s | e of filing or more than tatutory filing requi | 90 days after filing.) Pursuar rements, this date will not | nt to 605,020 be listed as |
| ne re The | cord specifies a delayed 90th day after the rec | l effective dat ord is filed, | e, but not an | effective time, a | at 12:01 a.m. on the | earlier o |
| Dated | SEPTEMBER 24TH | - | 2019 | | | |
| | | | 7 | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00