# L19000 253 863

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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#### **COVER LETTER**

	Registration Se Division of Cor			
SHR IF C	r. Lint	co Dryer Vent Clea	ining LLC	
SUBJEC	· ·	Name of Limi	ted Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please ret	urn all correspo	ndence concerning this matter t	to the following:	
		Dustin	Sm. H. Name of Person	
			Name of Person	
			Firm/Company	
		11744 Crest (	Creek Dr.	
			Address	
		Riverview,	FL 335C9 City/State and Zip Code	
			Ogman. Com  Obe used for future annual report not	
				tification)
For furthe	er information c	oncerning this matter, please ca	M:	
	Dustin Sa Name o	erith Descent	at (8/3 ) 767 - Area Code Daytin	7548
	Name o	reison	Area code 17ayin	ne reiepitene Palitier
Enclosed	is a check for th	ne following amount:		
\$25.0	0 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

Lintco Dryer Vent Cleaning L	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	npany)
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L 19000 <b>1</b> 53863</u> .	on 10 · 9 · 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	any here:
The new name must be distinguishable and contain the words "Limited Liability Company	y," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	<del></del>
Mailing address MAY BE A POST OFFICE BOX)	1-2
	261
B. If amending the registered agent and/or registered office addregistered agent and/or the new registered office address here:	ress on our records, enter the name of the
Name of New Registered Agent:	<del></del>
New Registered Office Address:	nter 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

## 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
MGR	Dustin McCary Smith	11744 Crest Creek Dr.	Madd
		Piverview, FL 33569	□ Remove
			Change
mar	Amber Genae Smith	11744 Crest Creek Dr.	<u></u> ₩ Add
		Riverview, FL 33569	□ Remove
			Change
			Add
		<del></del>	□ Remove
			Change
			□ Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

ctive date, if other than the date of filing:						
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ament's effective date on the Department of State's records.  The ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier nee 90th day after the record is filed.  The ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier nee 90th day after the record is filed.						
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ne 90th day after the record is filed.				ne statutory ming	requirements, this o	iate will not be listed a
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ed <u>Oct 29 2019</u>				an effective tir	me, at 12:01 a.i	m. on the earlier o
	he 90th day af	ter the record is file	ed.			
	£		2010			
Signature of a member or authorized representative of a member	red <u>OC</u>	<u>f 27                                    </u>	. 2019	-•		
Signature of a member or authorized representative of a member		Dist	Smith			
	<del></del>	Signature o	f a member or author	zed representative o	f a member	
Dustin M. 5m, th  Typed or printed name of signee		- 1·				

Page 3 of 3

Filing Fee: \$25.00