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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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COVER LETTER

Registration Section): **Division of Corporations** Patriot Power Washing JBJECT: Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: Carlos Vargas Name of Person Patriot Power Washing Firm/Company 4403 Birchwood Court. Address Tampa FL, 33624 City/State and Zip Code cvargas@patriotpowerwashllc.com E-mail address: (to be used for future annual report notification) urther information concerning this matter, please call: 904 655-1697 os Vargas Name of Person sed is a check for the following amount: 25.00 Filing Fee **\$30.00** Filing Fee & □ \$60.00 Filing Fee, □ \$55.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

(additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Patriot Power Washing LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on hability Company)	our records.)
Articles of Organization for this Limited Liability Company ida document numberL19000290881	were filed on Nove	ember 25, 2019 and assigned
s amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liabi	lity company here:	
triot Power Wash LLC		
new name must be distinguishable and contain the words "Limited Liabili	ity Company," the design	nation "LLC" or the abbreviation "L.L.C."
er new principal offices address, if applicable:		s 2
ncipal office address MUST BE A STREET ADDRESS)		TA CHE
r new mailing address, if applicable:		C 3 PH
ling address MAY BE A POST OFFICE BOX)		5 W 65
amending the registered agent and/or registered office a and/or the new registered office address here: Name of New Registered Agent:	ddress on our reco	rds, <u>enter the name of the new registe</u>
New Registered Office Address:	Enter Florida s	street address
		, Florida
	City	Zip Code
gistered Agent's Signature, if changing Registered Agent:		
y accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete the obligations of my position as registered agent as p	performance of my provided for in Chap	duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added removed from our records:

GR = Manager

MBR = Authorized Member

<u>tie</u>	<u>Name</u>	<u>Address</u>	Type of Action
4GR	Tanner tenorio	29836 Seacol Street. Clearwater FL, 33761	5
			□Add
			= Remove
			□Change
IGR	Jonathan Mai	8664 94th Street. Seminole FL, 33777	= Add
			□ Remove
		SECRE	Change Add
		CRETARY OF TALLAHASSE	Add
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	January 1, 2020	
ective date, if other than the date effective date is listed, the date must be specified in this block dument's effective date on the Department's	loes not meet the applicable statutory filir	(optional) more than 90 days after filing.) Pursuant to 605.020 mg requirements, this date will not be listed a
ord specifies a delayed effective date filed.	e, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
December 11	2019	
ed		
	/ <u> </u>	