## 

(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:

Office Use Only





## Sunshine State Corporate Compliance Company

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

DATE 09/10/2020		₩WALK IN**
ENTITY NAME EG Pres	sure Washing LLC	
DOCUMENT NUMBER		
	**PLEASE FILE THE ATTACHED AND RETURN**	
xxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
**P.	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINATI	ON	
NUMBER OF CERTIFICAT	ES REQUESTED	_
TOTAL OWED \$25.00	ACCOUNT #: I20160000072	
	5 8 FM	
Please call Tina at the	e above number for any issues or concerns. Thank you so	much!

## **COVER LETTER**

Registration Section Division of Corporations

TO:

EG Pressu	re Washing LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Megan Fuentes	<u></u>	
	<del> </del>	Name of Person	
	ZenBusiness PBC		
		Firm/Company	
	5900 Balcones Dr. Suite 5	000	
		Address	
	Austin, Texas, 78731		
		City/State and Zip Code	<del></del>
	fulfillment@zenbusiness.co		
	E-mail address:	to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Megan Fuentes		844 493-6249 at ()	
Name of Person		at () Area Code Daytime	Telephone Number
Enclosed is a check for	the following 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 Addre Registration Division of ( P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of T	porations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EG Pressure Washing LLC			
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appear lability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000292551}{L19000292551}$ .	were filed on H	/26/2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company he	<u>re</u> :	
E & L Landscaping and Lawn Service LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the de	esignation "LLC" or the ab	breviation "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>	<del> </del>
(Mailing address MAY BE A POST OFFICE BOX)			<del></del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our re	ecords, <u>enter the nam</u>	e of the new registered
New Registered Office Address:			
•	Enter Flor	ida street address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of rovided for in C	my duties, and I am f hapter 605, F.S. Or,	amiliar with and if this document is

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>	Name	Address	Type of Action
			□Add
		·	□Remove
			□Change
			□ Add
		-	□Remove
			□Change
			□Add
			□Remove
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lf an eff Note:	tive date, if other than the date fective date is listed, the date must be split the date inserted in this block direct's effective date on the Department's	pecific and cannot be prior t loes not meet the applica	o date of filing or more than 90	days after filing.) Pursuant to 60	
	rd specifies a delayed effective date lled.	e, but not an effective tir	ne, at 12:01 a.m. on the earl	ier of: (b) The 90th day afte	er the
11 (1 1 H		2020			
	September 10	·	<del>-</del> ·		
	September 10 /s/ Elimir Gutierrez Cru	z			
	/s/ Elimir Gutierrez Cru	z	rized representative of a member	er	

Filing Fee: \$25.00