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SEP 2 2 7020 S. YOUNG

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Soph	Name of Limit	ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
		Name of Person	
	Sophia Ma	oce cleaning Firm/Company	220
	1027 320	Address	
	Bradenta	Florida 34.	208
	Monce Antho	o be sed for future annual report notif	ication)
For further information co	ncerning this matter, please ca	N:	
Sphia Name of	More Person	at (<u>941</u>) <u>580 -</u> Area Code Daytimo	4691 Telephone Number
Enclosed is a check for the	e 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 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**

Sophia Mose (Name of the Limited Liability (A Florida	Cleaning LLC ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C	ompany were filed on Jan 15 2020 and assigned
Florida document number 420000021795	生のことは、これには、これには、これには、これには、これには、これには、これには、これに
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ted liability company here:
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "L.L.C." 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 records, enter the name of the new registered
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>	<u>Address</u>	Type of Action
AMBK	Sophia Mooke	1027 32nd Ave E	[X Add
		1027 32nd Ave E Bradenton F/ 3420	∑S □Remove
			□Change
			🗀 Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Remove
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			🗆 Add
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If an effective date is lis Note: If the date ins	ther than the date ted, the date must be spi erted in this block do date on the Departn	ecific and cannot be ses not meet the a	e prior to date of fili applicable statuto	ng or more than 90 d	ays after filing.) Pursu	
e record specifies a d rd is filed.	elayed effective date.	, but not an effec	tive time, at 12:0	a.m. on the earlie	er of: (b) The 90th	day after the
Dated		·	·			
	0				· · · · · · · · · · · · · · · · · · ·	
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