

L20000037014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

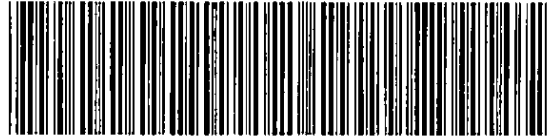
(Business Entity Name)

(Document Number)

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2023 NOV -7 PM 5:22

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2023 NOV -7 PM 3:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. BUTLER
NOV -7 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SantiClean Services LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Greg Kej
Name of Person
Reverie Construction
Firm/Company
7412 FL-77
Address
Southport, FL 32409
City/State and Zip Code
Greg@Reverieconst.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Greg Kej at (248) 310 - 4037
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED

2023 NOV -7 PM 5:22

SANTICLEAN SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/13/20 and assigned
Florida document number 220000037014

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7412 Hwy 77
SOUTHPORT FL 32409

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7412 Hwy 77
SOUTHPORT FL 32409

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

GRZEGORZ REJ

New Registered Office Address:

7412 Hwy 77

Enter Florida street address

SOUTHPORT

City

Florida

32409

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	CHLOE WOOD	37 SEABREEZE TRAIL	<input type="checkbox"/> Add
		INLET BEACH FL 32461	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GREGGORE REY	6241 LITTLE D.R. RD	<input checked="" type="checkbox"/> Add
		PANAMA CITY FL 32406	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DANIEL KIRK	49 WISH LAKE	<input checked="" type="checkbox"/> Add
		SANTA ROSA BEACH FL	<input type="checkbox"/> Remove
		32459	<input type="checkbox"/> Change
AMBR	MARLENE WOOD	37 SEABREEZE TRAIL	<input type="checkbox"/> Add
		INLET BEACH FL 32461	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

[Handwritten signature]

GREGORZ RE

Filing Fee: \$25.00