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COVER LETTER

Registration Section
Division of Corporations

TO:

UBJECT: SUPPRIOR (JPANES LLC) Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
Willie Bernard HAYWAVd Name of Person
SUPERIOR CHANGS LLC Firm/Company
225 old Village Center Circle #4205 Address
SAINT AUGUSTINE 161.32084 City/State and Zip Code
Bernard Hayward (13) 9 MAIL + Com E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Name of Person
nclosed is a check for the following amount:
\$25.00 Filing Fee Solution Sol
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Superior Cleane	rs LLC			
(Name of the Limited	i Liability Compai	ny as it now appears on liability Company)	our records.)	H
The Articles of Organization for this Limited Lia Florida document number <u>L260000</u> 8	bility Company	were filed on <u>93</u>	2420°	3-24-20 and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
The new name must be distinguishable and contain the wo	Clean	ag Superi	or Cleane	18 TTG
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the design	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	100 South	· ·	
(Principal office address MUST BE A STREET	ADDRESS)	SAN M.	Atro, El.	<u> 32187 </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B				4W AUE 3218夏 三 豆
B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office a <u>here</u> :	ddress on our reco	rds, <u>enter the nai</u>	ne of the new registered
Name of New Registered Agent:	•	1 JACKS		. 28
New Registered Office Address:	100,0	AKIAUU AI Enter Florida .	JE street address	
	SAN	MAteo	, Florida _	32187
		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.

Andra Jackson

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

Title MANASir)	<u>Name</u>	Address	Type of Action
MANASEV)	Erica Clackson	100 South UAKland AUE	SAN MAJEUJE-1, 321
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			□Change
			□Add
			□ Remove
			Change
			Change NOV Add
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neffecti <u>ste:</u> If t	date, if other than the date of filing: NOURM MER, 17, 2020 (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Puthe date inserted in this block does not meet the applicable statutory filing requirements, this date will seffective date on the Department of State's records.	rsuant to 603 I not be list	5.020 sed a
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cord s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	Oth day afte	er the
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ecord sp is filed.	Decifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 section and the earlier of: (c) The 90 section and (c) The 90 sectin	Oth day afte	er the