# L20000148538

(R	equestor's Name	)
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Na	me)
(0	ocument Number	·)
Certified Copies	Certificate	es of Status
Special Instructions to	o Filing Officer:	
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### Sunshine State Corporate Compliance Company

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

DATE_2/8/2021	<u>1                                    </u>	**WALK IN**
ENTITY NAME_	FRESH-N-KLEEN SOLUTIONS, LLC	
DOCUMENT NU	JMBER	
	**PLEASE FILE THE ATTACHED AND RETURN*	*
XXXXXX	Plain Copy	Section 1980
	Certified Copy  Certificate of Status	
	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE EI	VT/TY**
	Certified Copy of Arts & Amendments  Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION	**
COUNTRY OF DE NUMBER OF CER	ESTINATION	
TOTAL OWED		
Please call Ti	ina at the above number for any issues or concerns. T	Thank you so much!

#### **COVER LETTER**

	gistration Se vision of Cor			
ello trzy		KLEEN SOLUTIONS LLC		
SUBJE.C.I		Name of Lin	nited Liability Company	<u></u>
The enclose	ed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		LEANA GUZMAN		
			Name of Person	
		ZENBUSINESS PBC		
			Firm/Company	
		5900 BALCONES DR ST	E 5000	
			Address	
		AUSTIN, TX 78731		
			City/State and Zip Code	
		FULFILLMENT@ZENBU		
		E-mail address: (	to be used for future annual report notifi	cation)
For further	information co	oncerning this matter, please ca	all:	
LEANA G	UZMAN		844 493-6249	
	Name of	f Person	at () Area Code Daytime	Telephone Number
inclosed is	a check for th	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:

TO:

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

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION AND TO OF

2021 FEB -8 AH 9: 11

#### FRESH-N-KLEEN SOLUTIONS LLC

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

The Articles of Organization for this Limited Liability Company	were filed on <u>06/01/2020</u>	and assigned
Florida document number L20000148538		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		- ,
(Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ese .
		lorida
	City	lorida 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 ≃	<b>Authorized Member</b>

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:	 1	

AMBR = A	Nuthorized Member	2021 FEB -8 AM 9:11	
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Maxwell Ray Kralstein	Address 5127 nw 57th terrace grown and the FL	
		coral springs, FL 33067	■ Remove
			Change
		<del>-</del>	
			□ Remove
			□ Change
			Add
			□ Remove
			Change
			□ Remove
		<del>-</del>	☐ Change
	<u></u>	-	🗆 Add
			□ Remove
			☐ Change
			D Add
		-	□ Remove
			□ Change

	2021 FES -8 AM 9: 11
	TA 1 - YEAR TO
ective date, if other than the of effective date is listed, the date must e: If the date inserted in this bloument's effective date on the Department.	date of filing:
record specifies a delayed he 90th day after the reco	effective date, but not an effective time, at 12:01 a.m. on the earlier ord is filed.
ed	2021
JSI DEVEK ROPER	TR Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00