## LZ0000158194

(Re	equestor's Name)	
(Ad	ldress)	<del> </del>
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer;	

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## **COVER LETTER**

TO:	Registration Sc Division of Cor	ection eporations	,	
	PNP CONS	STRUCTION SERVICES LLC	;	<b>,</b>
SUBJI	ECT:			•
		Name of Lin	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		NICOLAE POCITAR		
		<del></del>	Name of Person	<del></del> -
			Firm/Company	
	Name of Person			
		WINTER GARDEN, FL		
		pocitar.nicolac@yahoo.con		<u>, , , , , , , , , , , , , , , , , , , </u>
		E-mail address: (	to be used for future annual report notific	cation)
For fur	ther information c	oncerning this matter, please c	all:	
		γ		
			at ( )	
	Name o	f Person	Area Code Daytime	l'elephone Number
Enclose	ed is a check for th	ne following amount:		
<b>3</b> \$2.	5.00 Filing Fee		Certified Copy	Certificate of Status &
	Mailing Addres Registration S		<u>Street Address:</u> Registration Secti	ion

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

PNP CONSTRUCTION SERVICES LLC	2023 NOV 12 PM 4:	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.	ATE FL
The Articles of Organization for this Limited Liability Company we have $\frac{1.20000158194}{1.20000158194}$ .	t 10. 2020	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili Orlando Mobile Detailing LLC	ty company here:	
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or t	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 BOX)		
3. If amending the registered agent and/or registered office ad gent and/or the new registered office address here:	dress on our records, enter the	name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del></del>
	, Florid:	
	City	Zip Code

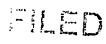
## New Registered Agent's Signature, if changing Registered Agent:

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 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	2023 NOV 12 PM 4: 07	Type of Action
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	2023 NOV 12 PM 4: 07	
	SEMILIARY OF MATE	
	TALLAHASAEE, FL	
-		
	• •	
	filing: (optional) citic and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, is not meet the applicable statutory filing requirements, this date will not be listed ent of State's records.	
ecord specifies a delayed effective da is filed.	but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after	: the
November (4 ted	2020	
A 1		

Typed or printed name of signee