L20000 193961

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500358117495

RECEIVED

JAN 1 9 2021

01/21/21--01021--009 **30.00

2021 JAN 19 PH 2: 17 SECRETAL TOE STATE



COVER LETTER

4.	ision of Cor				
	ALLLAND	SCAPE SERVICES, LLC			
SUBJECT:		Name of Lin	nited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Mohammed Sanhaji			20 S
			Name of Person	_	SEAFER Y OF STATE
			Firm/Company	<u></u> -	19
		665 NW 38th Circle			PH 2:
			Address		平二
		Boca Raton, FL 33431			_
		sanhaji@gmail.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report not	ification)	
For further in	nformation c	oncerning this matter, please c	all:		
sanhaji@gm	nail.com		561 436-2756 at ()		
	Name o	f Person	Area Code Daytin	ne Telephone Numbe	<u> </u>
Enclosed is a	a check for th	ne following amount:			
□ \$25,00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
Reg Div P.C	iling Addres gistration S vision of C D. Box 632 llahassee, I	Section orporations 7	Street Address: Registration Sc Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee oe Street, Suite 8	310

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ted Liability Compa (A Florida Limited	any as it now appears on our i Liability Company)	records.)
The Articles of Organization for this Limited I	iability Company	were filed on <u>07/08/2020</u>	and assigned
Florida document number L20000193961	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
CLEANCUT PRO, LLC.			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STREA	ET <u>ADDRESS)</u>		202) SED
			19
Enter new mailing address, if applicable:		665 NW 38th Circle	
Mailing address MAY BE A POST OFFICE	BOX)	Boca Raton, FL 33431	
			5T/A
			rd -1
B. If amending the registered agent and/or		address on our records, g	enter the name of the new registe
ngent and/or the new registered office addre	ess nere:		
Name of New Registered Agent:	Mohammed Sa	ınhaji	
New Registered Office Address:	665 NW 38th 0	Uircle	
non neglacied office indicas.		Enter Florida street (address
	Boca Raton		Florida <u>33431</u>
		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 Legistered 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>	Address	Type of Action
MGRM	SANHAJI, MOHAMMED	665 NW 38TH CIR	= Add
		BOCA RATON, FL 33431	□Remove
			□Change
MGRM	MEZHER, ALI MAJEED	2400 NE 2ND AVE	□Add
		BOCA RATON, FL 33431	□Remove
			Change
			Add T
			2: Change
			□Remove
			Change
<u>.</u>			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

		<u></u>			_
					
					
	<u> </u>				
				2021 SEC	SET 5
				JAN LEGA	
					1-1-1-1
				SH S	ž (~~)
			 -		- -
	-			<u>, רון </u>	
			.		
	-				
		<u> </u>			
ite: If the date inserted in the	n the date of filing: the must be specific and cannot be his block does not meet the a the Department of State's re-	applicable statutory fi	more than 90 days after		
ecord specifies a delayed efi is filed.	fective date, but not an effec	tive time, at 12:01 a.r	n, on the earlier of: (b)) The 90th da	y after the
ted					
					
	Signature of a member o				_

Filing Fee: \$25.00