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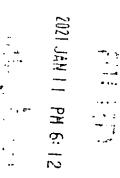
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
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Certified Copies	Certificates of	Status
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COVER LETTER

TO: Registration S Division of Co			·	
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e de la compansión de l	To a Charles A	1 .1		
SUBJECT: 5ME	1 100 Fluoreing une	a cuaring 11C		
	TOP Fluoring and Name of Lin	nited Liability Co o rpany		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
,	-	g.		
	- Marcar 7	Name of Person		
		Name of Person		
	<u> GMG TOP</u>	flooung and (lia	nerex 110	
		Firm/Company	O	
	1.			
	7742 Jergw	VC Pary Address		
	<i>'</i>	Address		
	n.,	a		
	<u> Viando</u> Fl	32835 City/State and Zip Code		
		City/State and Zip Code		
				
	E-mail address: (to be used for future annual report not	tification)	
For further information of	concerning this matter, please c	all:		
		at (
Name o	of Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for t	he following amount:			
☐ \$25.00 Filing Fee	☎ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,	
-	Certificate of Status	Certified Copy	Certificate of Status &	
		(additional copy is enclosed)	Certified Copy	
			(additional copy is enclosed)	
Mailing Address:		Street Address:	.•	
Registration Section		-	Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee,			oe Street, Suite 810	
		= 112 tr. biom0	w oncer, built one	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6MG top flowing and cleaning 11c	
(Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company)	
	2021
The Articles of Organization for this Limited Liability Company were filed on07/30/303	O and assigned
Florida document number <u>L20000213043</u> .	
This amendment is submitted to amend the following:	PH
A. If amending name, enter the new name of the limited liability company here:	6: 12
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)	·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter	the name of the new registere
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street addres	S
	orida
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 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
RA	Marcos mouna	7742 penguove pass	⊠Add
	"add registered agent as" managing member.	Oylando Fl 32835	□Remove
			□Change
MGR	MGR geilta Pereira	7742 penanove pass	□Add
		Dilando FL 30835	□Remove
			
			□Add
		□Remove	
			Change
			□Add
		□Remove	
			
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(If an eff Note:	ve date, if other than the date of filing:
the recor	d 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 ed.
Dated	January 5th . 2021.
	Signature of a member or authorized representative of a member
	Marcos Morelika Typed or printed name of signee