## 120000335220

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| PICK                | -UP      | ☐ WAIT           | MAIL        |
|                     | (Bus     | siness Entity Na | me)         |
| 1                   | (Doc     | cument Number    | )           |
| Certified Copies _  |          | _ Certificate    | s of Status |
| Special Instruction | ons to F | Filing Officer:  |             |
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## **COYER LETTER**

| TO: Registration Se<br>Division of Cor | •                                            |                                                                     |                                                             |             |
|----------------------------------------|----------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------|-------------|
| CleanPure                              | LLC <sub>.</sub>                             |                                                                     | .•                                                          |             |
| SUBJECT:                               | Name of Lim                                  | ited Liability Company                                              |                                                             |             |
|                                        |                                              |                                                                     |                                                             |             |
| The enclosed Articles of               | Amendment and fee(s) are sub                 | mitted for filing.                                                  |                                                             |             |
| Please return all correspo             | ndence concerning this matter                | to the following:                                                   |                                                             |             |
|                                        | Nouh                                         |                                                                     |                                                             |             |
|                                        |                                              | Name of Person                                                      |                                                             | ~~1<br>~~)  |
|                                        | Feldman                                      |                                                                     |                                                             | 0.73        |
|                                        |                                              | Firm/Company                                                        | 25:                                                         | · · ·       |
|                                        | 20185 East Country Club !                    | Dr #1806                                                            | ASSE                                                        | -2 PMII: 24 |
|                                        |                                              | Address                                                             | E ST                                                        | = C         |
|                                        | Aventura, FL 33180                           |                                                                     | AE AIE                                                      | 24          |
|                                        |                                              | City/State and Zip Code                                             |                                                             |             |
|                                        | noahfeldman5@gmail.com                       |                                                                     |                                                             |             |
|                                        | E-mail address: (                            | to be used for future annual report notif                           | ication)                                                    |             |
| For further information of             | oncerning this matter, please c              | all:                                                                |                                                             |             |
| Noah Feldman                           |                                              | 305 7253060<br>at ( )                                               |                                                             |             |
| Name e                                 | f Person                                     |                                                                     | Telephone Number                                            | _           |
| Enclosed is a check for the            | he following amount:                         |                                                                     |                                                             |             |
| ■ \$25.00 Filing Fee                   | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Sectificate of S<br>Certificate Copy<br>(additional copy is | Status &    |
| Mailing Addres                         | <u>ss:</u>                                   | Street Address:                                                     |                                                             |             |
| Registration                           |                                              | Registration Sec                                                    |                                                             |             |
| Division of C<br>P.O. Box 632          | •                                            | Division of Cor<br>The Centre of T                                  |                                                             |             |
| Tallahaccae                            |                                              |                                                                     | Street Suite 810                                            |             |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| CleanPure LLC                                                                                                     |                                                             |                     |
|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------|
| (Name of the Limited Liability Compa<br>(A Florida Limited                                                        | ny as it now appears on our records.)<br>Liability Company) | <del></del> -       |
| The Articles of Organization for this Limited Liability Company  L20000235220  Lorida document number             | were filed on August 5th, 2020                              | and assigned        |
| This amendment is submitted to amend the following:                                                               |                                                             |                     |
| A. If amending name, enter the new name of the limited liab                                                       | ility company here:                                         |                     |
| Noah M, Feldman ELC                                                                                               |                                                             |                     |
| The new name must be distinguishable and contain the words "Limited Liabi                                         | lity Company," the designation "LLC" or the ab              | breviation "L.L.C." |
| Enter new principal offices address, if applicable:                                                               |                                                             | 7.3                 |
| Principal office address MUST BE A STREET ADDRESS)                                                                |                                                             | 6.7                 |
| The party office address frost in A STREET ROOMSS                                                                 | 7<br>3 (4)                                                  | ·                   |
|                                                                                                                   |                                                             | , to :              |
|                                                                                                                   | ທີ່<br>ທິ<br>ເກື                                            |                     |
| Enter new mailing address, if applicable:                                                                         |                                                             |                     |
| Mailing address MAY BE A POST OFFICE BOX)                                                                         |                                                             | <u> </u>            |
|                                                                                                                   |                                                             | n +                 |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, enter the nam                       | e of the new reg    |
| Name of New Registered Agent:                                                                                     | · <del></del>                                               |                     |
| New Registered Office Address:                                                                                    |                                                             |                     |
| <u></u>                                                                                                           | Enter Florida street address                                |                     |
|                                                                                                                   | , Florida                                                   |                     |
|                                                                                                                   | 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 = | <b>Authorized Member</b> |

| <u>Title</u> | Name | <u>Address</u> <u>T</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                    |
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| water official terral condition also                                               | Asses & Clines                        |                                       | / <b>^</b> '        | 15                                          |                                                  |          |
| ctive date, if other than the effective date is listed, the date must              | st be specific and cannot be prior    |                                       |                     | iling.) P                                   |                                                  |          |
| <ul> <li>If the date inserted in this blument's effective date on the D</li> </ul> |                                       | able statutory filing                 | requirements, this  | date wi                                     | ll not b                                         | e listec |
|                                                                                    |                                       |                                       |                     |                                             |                                                  |          |
| ord specifies a delayed effective                                                  | e date, but not an effective ti       | me, at 12:01 a.m. or                  | the earlier of: (b) | The 9                                       | 0th day                                          | after    |
| filed.                                                                             |                                       |                                       |                     |                                             |                                                  |          |
| August 29,                                                                         | 2022                                  |                                       |                     |                                             |                                                  |          |
| ed                                                                                 | • -                                   |                                       |                     |                                             |                                                  |          |
| 4                                                                                  | <u> </u>                              |                                       |                     |                                             |                                                  | _        |
| <u></u>                                                                            | Signature of a member or author       |                                       |                     |                                             |                                                  |          |