L20000265643

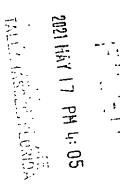
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Special Instructions to Fi	ling Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tidy Spaces UC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
<u>Dinaester Azurlera</u> Name of Person
Firm/Company
2109 N Lincoln Ave.
Tampa H 33607 City/State and Zip Code
TidyLane Organizing @ gmail. com E-mill address: (to be used for future annual reported citication)
For further information concerning this matter, please call:
Dina Aguil Wa at (813) 578-7250 Name (Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
★ \$25.00 Filing Fee
Mailing Address: Registration Section Street Address: Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tidy Spaces L (Name of the Limited Liability Comp (A Florida Limited	L C any as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L20000265643}{L}$.	y were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
Tidy Lave Organizing, LLC The new name must be distinguishable and contain the words "Limited Liab		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PH 1: 05
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our reco	rds, <u>enter the name of the new register</u>
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida	street address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	
I hereby accept the appointment as registered agent and ag	gree to act in this cap	pacity. I further agree to comply with t

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

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ffective date, if other than the date of filing: 05-01-207 an effective date is listed, the date must be specific and cannot be prior to date of filing: If the date inserted in this block does not meet the applicable statuto ocument's effective date on the Department of State's records.	(optional) ing or more than 90 days after filing.) Pursuant to 605 ory filing requirements, this date will not be list	5.020 ed a
record specifies a delayed effective date, but not an effective time, at 12:0 d is filed.	1 a.m. on the earlier of: (b) The 90th day afte	r the
Dated 5 12 2021)	
1 Day 1 1		

Filing Fee: \$25.00