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SUBJEC	Strategic Ha			
SOBJEC		Name of Limi	ted Liability Company	
The encl	osed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please ro	eturn all correspo	ndence concerning this matter t	to the following:	
		Travis Graves		
			Address E. mail address: (to be used for future annual report notification) ing this matter, please call: 234-4834 at (1.0000
		Strategic Hauling LLC		
			Firm/Company	
		8422 Lostara Ave N		
			Address	· · · · · · · · · · · · · · · · · ·
		Jacksonville, FL 32211		
			City/State and Zip Code	
		Spwjax@gmail.com		
		E-mail address: (1	o be used for future annual report notifi	ication)
For furth	er information c	oncerning this matter, please ca	ill:	
Travis C	iraves			
	Name of	l' Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	ne following amount:		
□ \$ 25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Sec	etion

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

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	y Company as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 09/28/2020 	and assigned
This amendment is submitted to amend the following:		2025
A. If amending name, enter the new name of the limit	ted liability company here:	
Strategic Pressure Washing LLC		2
he new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "L	I.C" or the abbreviation "L.I.C." V
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	<u> </u>
		``
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	submitted to amend the following: ame, enter the new name of the limited liability company here: Vashing LLC distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" by the pal offices address, if applicable: ddress MUST BE A STREET ADDRESS) g address, if applicable: MAY BE A POST OFFICE BOX) the registered agent and/or registered office address on our records, enter the name of the new registered new registered office address here: New Registered Agent:	
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, ent	ter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	tress
		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 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
			□Add
			□Remove
			□Change
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effective	e date is listed, the date of date inserted in the	e must be specific	and cannot be			re than 90 days	after filing.		
	e date inserted in in effective date on the				itutory minig	requirement	s, this date	will flot be fist	.cu a
	ecifies a delayed eff	ective date, but	not an effect	tive time, at	12:01 a.m. oi	the earlier o	of: (b) The	e 90th day afte	r the
s filed.									
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