6200005563

(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



000405350150

722578 62 STM

R. HUNT O3/25/25

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: One and Done Pressure wishing and Lawn Services LLC 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:
Jermit C. McCall Sr.
byeard Done Presure washing and lawn serves L
5001 Drew Ct
Tampa, A 33619 City/State and Zip Code Dineand done 34 Dyahoo OM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Termit Weal Sk at 813 U14 - U008 77 8 Name of Person at 813 Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \$\ \ext{Certified Copy (additional copy is enclosed)} \$\ Cert

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

One and Done Dressur Washing and Lawn Sendes LC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 20 0101110 20 00 and a	assigned
Florida document number <u>L20003055</u> 63	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ility company here:	
One and Done Property S	solutions LC.	
The new name must be distinguishable and contain the words Limited Liability	ity 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)	27.	
	· · · · · · · · · · · · · · · · · · ·	
Enter new maîling address, if applicable:	17 🐠 .	*
		1 ş
(Mailing address MAY BE A POST OFFICE BOX)		
	- 7	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>enter the name of the </u>	new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City Zip Co	de
New Penistered Agent's Signature if changing Registered Agent:	•	

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			☐ Change
			□Add
			□Remove
			Change
			Remove 22 Change
			□Add
			Remove
			☐ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	- ***	···
	·	
		20
	:	<u> </u>
		%
		დ <u></u>
		>>
tive date, if other than the date of filing:	(optional)	
fective date is listed, the date must be specific and cannot be prior to date of filing or mo- If the date inserted in this block does not meet the applicable statutory filing	ore than 90 days after filing.) P g requirements, this date wi	ursuant to 605.0 Il not be listed
nent's effective date on the Department of State's records.		
rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. ciled.	on the earlier of: (b) The S	90th day after
71011		
3/24/2 2025		
9005		