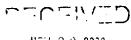
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Office Use Only



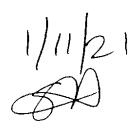
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Shiny And Fresh Cleaning Services 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:
Vedana Geda Name of Person
Shiny And Fresh Cleaning Services
1247 Ellipse St E.
Lehigh Acres FC 33074 City/State and Zip Code
Ojeda Jedana Quahoo. Com Je-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person's Peda at (786), 860-3468 Area Code Daytime Telephone Number
Enclosed is a check for the following amount: 2 \$25.00 Filing Fee \$25.00 Filing Fee \$25.00 Filing Fee \$255.00 Filing Fee \$255.

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

Fresh Cleaning Services

(A Florida Limite	d Liability Company)
The Articles of Organization for this Limited Liability Comparellorida document number 12000312605	ny were filed on 10 15 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and contain the words "Limited Lia	bility 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)	1247 Ellipse st E lehigh Acres, FC 33974
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1247 Ellipse St E = 1 1ehigh Acres, FL 335174
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
Name of New Registered Agent:	ana Ojede
New Registered Office Address: 1247	Ellipse St E. Emer Florida street address
<u>Lehig</u> .	h ACVES Florida 33974 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 = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Yedana Ojeda	1247 FILIPSE STE	XAdd
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	mistake		□Change
MGR	Lourdes Fernandez	2 6741 Marna Ln	Add
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			□Remove

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an effective date is ote: If the date	other than the date listed, the date must be sp inserted in this block dive date on the Departi	pecific and cannot foes not meet th	e applicable :	\$\frac{1000}{1000} (te of filing or more statutory filing	e than 90 days	optional) s after filing.) s, this date v	Pursuant to 605, will not be liste
	i delayed effective date	e, but not an eff	ective time, a	at 12:01 a.m. or	the earlier o	of: (b) The	: 90th day after
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is filed.	8/2020	·_					
record specifies is filed.	8 2020 Wasta		Thank	. 1			