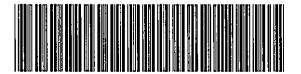
L10 000525703

(Req	uestor's Name)	
(Addi	ess)	<u> </u>
•	,	
(Adda	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) fied Copies Certificates of Status ecial Instructions to Filing Officer:	MAIL
		_
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
(200)	ument (vamber)	
Certified Copies	Certificates	of Status
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Special Instructions to Fi	lling Officer:	





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DEC ! / . .

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COVER LETTER

TO:

то:		stration Secsion of Corp		•.			
	QUALITY TOUCH PRESSURE WASHING LLC				**		
SUBJEC	CT: ,		Name of Lim	ited Liability Co	mpany		
The encl	losed	Articles of a	Amendment and fee(s) are sub	mitted for filing	g.		
Please re	eturn	all correspo	ndence concerning this matter	to the following	g:		
			DANIEL RIVERA				
				Name of	Person		
			QUALITY TOUCH PRES	SURE WASH	ING LLC		
			·	řim/Coi	npany		<u> </u>
			11636 DARLINGTON DE	RIVE			
			-	Addre	:88	_	
			ORLANDO, FLORIDA 33	2837			
				City/State and	•		·
			QCPRESSUREWASHING E-mail address: (-		rt notification)	
For furth	her in	formation co	oncerning this matter, please ca	ail:			
DANIE	L RI	/ERA		407 at (953-31	47	
Name of Person			Code D	aytime Teleph	one Number		
Enclosed	d is a	check for th	ne following amount:				
■ \$25	.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 F Certified (additional			S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Div P.O	ing Address istration S ision of C . Box 632 ahassee, f	Section orporations 7		Street Addre Registratio Division of The Centre 2415 N. Mo Tallahassee	n Section *Corporation of Tallaha onroe Stree	ssee a. Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

QUALITY TOUCH PRESSURE WASHING LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	

(Marie With Marie	(A Florida Limited	Liability Company)	ttorus.)			
The Articles of Organization for this Limited Liability Company were filed on 10-14-2020 Florida document number L20000325703				and assigned		
This amendment is submitted to amend the foll	owing:					
A. If amending name, enter the new name o	f the limited liab	ility company here:				
QUALITY CHOICE PRESSURE WASHING LL						
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	"LLC" or the abbrev	riation "L.L.C.		
Enter new principal offices address, if applicable:		11636 DARLINGTON DRIVE				
(Principal office address MUST BE A STREET ADDRES		ORLANDO, FLORIDA	32837	2021		
		<u>-</u>		35	, .	
Enter new mailing address, if applicable:		SAME		12		
(Mailing address MAY BE A POST OFFICE BOX)					. 1	
Think was the first of the beautiful to	<u>boxy</u>			 	<u>:-^</u>	
				, 8		
B. If amending the registered agent and/or ragent and/or the new registered office addre	registered office : ss here:	address on our records, <u>c</u>	enter the name of	f the new re	egistere	
Name of New Registered Agent:	CHRISTOPHE	ER RIVERA	,			
New Registered Office Address:	H636 DARLE	NGTON DRIVE				
	Enter Florida street address					
	ORLANDO		. Florida <u>32837</u>			
	City		Zip Code			
New Registered Agent's Signature, if changing l	Registered Agent:					
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete istered agent as p registered office	performance of my dution provided for in Chapter (es, and Lam fam 605, F.S. Or. if t	iliar with a his docume	md	

f Changing Registered Agent, Signature of New Registered Agent-

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CHRISTOPHER RIVERA	11636 DARLINGTON DRIVE	
		ORLANDO, FLORIDA 32837	□Remove
			□Change
AMBR	JASON D. LEWIS	4233 ILENE COURT	= Add
		ORLANDO, FLORIDA 32806	□Remove
			□Change
			□Add
			□Remove
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ective date, if other than the date effective date is listed, the date must be e: If the date inserted in this block ument's effective date on the Department's effective date on the Department.	c does not meet the applicabl	date of tiling or more than le statutory filing requir	(optional) 90 days after filing.) Pursuant to 6 ements, this date will not be l	505.020 isted a
cord specifies a delayed effective d i filed.	ate, but not an offective time	e, at 12:01 a.m. on the e	arlier of: (b) The 90th day a	fter the
NOVEMBER 1ST	2020			
	 ·	•		
	gnature of a member or authoriz		 	

Filing Fee: \$25.00