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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Excel Cle	aning and Be	estoration, LCC
	Name of that	ted Endotting Company	
The enclosed Articles of .	Amendment and fec(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Plnamin f-6	
		Firm/Company	
	•	efa Avenue	
	New Sn	Winon Beach F	-L 32168
		nsandrestxation	
For further information co	oncerning this matter, please ca	ıll:	
Daniel	Penaminte Person	at (<u>917</u>) <u>6/o</u> Area Code Daytin	1 - 9151 ne Telephone Number
Enclosed is a check for the	e following amount:		
525,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60 00 Filing Fee Certificate of Status & Certified Copy (additional copy is arclosed)
Mailing Addres Registration 9 Division of C	Section \(\)	Street Address: Registration So Division of Co	rporations
P.O. Box 632 Tallahassee J	· · · · · · · · · · · · · · · · · · ·	The Centre of 2415 N. Monro	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION DE CHYPISION

Excel Cleaning	- and Pestxation LCC.
(Name of the Limited Liability Company) (A Florida Limited Bab	as it now appears on our records.) oility Company)
The Articles of Organization for this Limited Liability Company we Florida document number	ere filed on 20221 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	y company here:
The new name must be distinguishable and contain the words "Limited Liability	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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office addagent and/or the new registered office address here:	dress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	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:

DIVISION OF COMPORATION MGR = Manager AMBR = Authorized Member 21 MAR 15 TAR OF Action Title Address **Name** Sandra Penamonte 3447 Poneta Puence DADO New Smyrna Beach, FL Jagnove 32168 Change _____ □Remove □Remove __ □Remove _____ □Change _____ □Remove

	อาที่เรียห์ ดัก จัดหักดัส 4104
	21 HAR 15 PA 2: 19

Effective date, if other than the date of filin (If an effective date is listed, the date must be specific in Note: If the date inserted in this block does not document's effective date on the Department of 2	d cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 () meet the applicable statutory filing requirements, this date will not be listed as the
he record specifies a delayed effective date, but no ord is filed.	of an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
Dated 3/1/21	
Signature of a	member or authorized representative of a member

. . . .