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(Re	equestor's Name)	
(Ad	ldress)	
		
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	h.(Cant-17:(Dh	<u> </u>
(Ch	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
		 -
Special Instructions to	Filing Officer:	

Office Use Only



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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 03/04/2021		₩ALK IN
PARTIE REFINE	HOME CLEANING, LLC	WILLIAM IIV
ENTITY NAME NET INC	HOME CLEANING, ELC	
DOCUMENT NUMBER		
	PLEASE FILE THE ATTACHED AND RETURN	
XXXX	Plain Copy	, ···
	Certified Copy	
	Certificate of Status	
P{	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	/
	Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINATI	ON	
NUMBER OF CERTIFICAT	ES REQUESTED	
TOTAL OWED \$25.00	ACCOUNT #: I20160	000072
		A.
Please call Tina at the	e above number for any issues or concerns. Thank	you so much!

COVER LETTER

TO: Registration So Division of Cor				
Refine Hor	ne Cleaning LLC			
SUBJECT:	Name of Lin	ited Liability Company		
The analogue Assistance	Amendment and fee(s) are sub	anistal for films		
		-		
riease return all correspo	ondence concerning this matter	to the following:		
	Fabrizio Lengua			
	1111	Name of Person		
	ZenBusiness PBC			
		Firm/Company		
	5900 Balcones Drive Suite	e 5000		
		Address		
	Austin, TX 78731			
	· 	City/State and Zip Code		
	fulfillment@zenbusiness.co	om to be used for future annual report noti	G	
For further information o	oncerning this matter, please e		neation)	
	oncerning this matter, please c			
Fabrizio Lengua Name of Person		512 237-7349 at ()		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration S Division of C		Registration Sec Division of Corr		
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Refine Home Cleaning LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our record hability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability Company	were filed on 02/22/2021	and assigned
lorida document number L21000087790		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
crub Squad LLC		
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		Qp
		TI MAR TI
nter new mailing address, if applicable:		AP =
Mailing address MAY BE A POST OFFICE BOX)		
		T , T
		w
. If amending the registered agent and/or registered office a	ddress on our records, <u>enter</u>	the name of the new registo
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	i
	. Flo	orida
·	City	orida 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>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
			☐ Change
			🗀 Add
			□Remove
			[i]Change
			□Add
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Effective date, if other (If an effective date is listed, Note: If the date inserte document's effective da	the date must be specific d in this block does no	and cannot be prior of meet the applica	able statutory filing	(option: re than 90 days after fili requirements, this da	al) ng.) Pursuant to 605,0207 (3 nte will not be listed as th
the record specifies () The 90th day afte	delayed effective the record is file	e date, but not ed.	t an effective ti	me, at 12:01 a.n	n. on the earlier of:
		2021			
Dated		_ ·	<u> </u>		
Dated 03/03			Mays	f a member	

Page 3 of 3

Filing Fee: \$25.00