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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Custodial Property 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:
Kristen Dunn Name of Person
Custodial Property Services
Firm/Company
145 Granaka Street Address
Royal Palm Beach, Pe 33411 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shaum Junker at (561) 644-7583 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compar	pears on our records.)
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L21000132962</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	y here:
The new name must be distinguishable and contain the words "Limited Liability Company," to Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	the designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:	ur records, enter the name of the new register
Nicon CN on Dugist and Assurts	2021 H
Name of New Registered Agent:	
New Registered Office Address: Enter	Florida street address
	Florida 2 = 0
Cin	Vin Civia

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.

New Registered Agent's Signature, if changing 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
A	Kristen Dunn	145 Granada Street	□Add
AMOR	145 Granada Street Royal Palm Beach, R	33 41 \ □Remove	
			Change
AMBR	Shawn Junker	145 Granada Street	□∧dd
		Royal Palm But, Fi 33	341 l □Remove
			Change
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(If an el Note :	tive date, if other than the date of filing:
f the record is t	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	November 22 . 2021. Chairty Durn Kaisten Durn

Typed or printed name of signee