## K12000141653

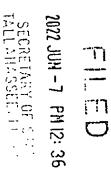
(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Dc	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	
Cpecial instructions to	J. HORN	





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## **COVER LETTER**

TO:

	Registration Se Division of Cor			
oun ire	Alonzo Pre	ssure Washing & Maintenance	LLC	
SUBJEC		Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		Ismael Alonzo-Mendoza		
			Name of Person	
Alonzo rressure Washing & Maintenance LLC				
			Firm/Company	····
		8103 wheystone dr		
		•	Address	
		webster fl, 33597		
			City/State and Zip Code	
		erinharris94@gmail.com		
		E-mail address: (	to be used for future annual report no	otification)
For furthe	er information c	oncerning this matter, please ca	all:	
Ismael A	lonzo-Mendoza		813 451-3742 at ( )	
· ·	Name o	f Person		me Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 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	ection
	Registration S Division of C		Division of Co	
	P.O. Box 632		The Centre of	-
•	Tallahassee, I	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

63

ALONZO PRESSURE WASHING & MAINTENANCE LLC

2022 JUN -7 PH 12: 39

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) TALLAHASSEE, TE The Articles of Organization for this Limited Liability Company were filed on 3/25/2021 and assigned Florida document number L21000141653 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Alonzo Services LLC 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

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
			□ Add
			Remove
			□Change
			□Add
			□ Remove
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i amenuili)	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an effective ( ote: If the	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed reffective date on the Department of State's records.
record spec is filed.	rifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated May	23 , 2022
7	Signature of a member or authorized representative of a member
1.	
18	Typed or printed name of signee

Filing Fee: \$25.00