## K21000145275

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## **COVER LETTER**

	ration Section on of Corporations	
SUBJECT:	ne Neat Squad, LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed	rticles of Amendment and fee(s) are submitted for filing.	
Please return	correspondence concerning this matter to the following:	
	Christina L Singleton	
	Name of Person	
	The Neat Squad, LLC	2921 J
	Firm/Company	·
	9838 Old Baymeadows Rd #350	55. 11d 2- RJF 126
	Address	
	Jacksonville, FL 32256-8101	2: 08 Sign
	City/State and Zip Code	- '
	info@thencatsquad.com	
For further in	E-mail address: (to be used for future annual report notification) rmation concerning this matter, please call:	
Christina L S		
	Name of Person	<del></del>
Enclosed is a	neck for the following amount:	
■ \$25.00 F	Certificate of Status Certified Copy Certifica (additional copy is enclosed) Certified	te of Status &
Reg Div P.O	g Address: tration Section ion of Corporations Box 6327 nassee, FL 32314  Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	10

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Neat Squad, LLC					
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appear: Limited Liability Company)	s on our records.)	. —		
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{037}{1}$	28/2021		an	d assigned
Florida document number L21000145278	<u>_</u> :				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	ted liability company he	<u>re</u> :			
Neat Squad, LLC					
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the de	esignation "LLC" o	or the abl	breviatio	on "L.L.C."
Enter new principal offices address, if applicable:	9838 Old Baymo	eadows Rd #350	£*.	292	
(Principal office address MUST BE A STREET ADDR	(ESS) Jacksonville, FL	32256-8101	- :	<u></u>	in and the second
		·		1	6 7531 744.18
Enter new mailing address, if applicable:	9838 Old Baymo	eadows Rd #350	. 1	PH S	
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL	32256-8101	5.7	<del>- 12 -</del> - <del>Co</del>	
B. If amending the registered agent and/or registered	Loffice address on our re	ecords enter th	e name	e of th	e new regi
agent and/or the new registered office address here:					
Name of New Registered Agent:					
New Registered Office Address: 9838 C	Old Baymeadows Rd #350				
	Enter Florida street address				
Jackson		Florida 32256-8101		01	
	City				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
v	Lucas J Parham	7595 Baymeadows Cir W, Apt 2104	□Add
		Jacksonville, FL 33415	Remove
			□Change
			□Add
		<del> </del>	☐ Remove
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ctive date, if other than t	ha data of filings		(optional	
effective date is listed, the date n  E: If the date inserted in this iment's effective date on the	nust be specific and cannot be p block does not meet the ap	plicable statutory fil	more than 90 days after filing	g.) Pursuant to 605.020
ord specifies a delayed effectiled.	tive date, but not an effectiv	e time, at 12:01 a.m	. on the earlier of: (b) T	he 90th day after the
ed May 28	2021			
ned W	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	uthorized representati		

Typed or printed name of signee