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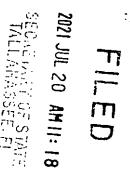
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Office Use Only



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2 Killses

COVER LETTER

	ation Section n of Corporations
SUBJECT:	KCCLEAN L.L.C
	Name of Limited Liability Company
The enclosed Ar	ticles of Amendment and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	KATRICE MCBAIN Name of Person
	KCCLEAN L.L.C. Firm/Company
	3029 N ROOSE VELT BLVO #48
	KEY WEST F1 33040 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further infor	nation concerning this matter, please call;
Kat	Name of Person at (862) 944 2091 Area Code Daytime Telephone Number
	The Code Dayting receptions (Manuel
Enclosed is a che	eck for the following amount:
□ \$25.00 Filin	g Fee
Mailing	Address: Street Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

VCCICAN 1.1 C

(Nume of the Limited Liability		<u> </u>	
(A Florida	ty Company as it now appears on our records. Limited Liability Company)	,)	
The Articles of Organization for this Limited Liability C		2021 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
K Christopher	Clean L.L.C		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		82	
(Principal office address MUST BE A STREET ADDR	RESS)		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	20 AMII: I	
(Mailing address MAY BE A POST OFFICE BOX)	-	<u>ni</u> o	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter tl</u>	he name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Flor		
	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 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
			□Rcmove
			□Change
			□Add
			□Remove
			☐ Change
			UAdd
			□Remove
			Change
			□ Add
			□Remove
			[I] Change
			□ Add
			□Remove
			□Change

). If amending any other	er information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
(If an effective date is listed. Note: If the date insert	er than the date of filing: 716202 (optional) In the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(the date on the Department of State's records.
If the record specifies a dela record is filed.	tyed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 7	116/2021.
	Signature of a member or authorized representative of a member
	KATRICE MCBAIN Typed or printed name of signee