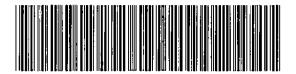
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor				
SUBJECT: <u>E</u>)	press Mobile Name of Limi	Pressure Woshing	L Detailing Service L	LC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
		S Jamaal Name of Person bile Pressure Wa		
	<u> </u>	Firm/Company	1	
	2260 NW	52nd St Address		
	Mian	FL 33142 City/State and Zip Code	• -	
	E-mail address: (to be used for future annual report notifi	cation)	
For further information c	oncerning this matter, please ca	all:	:# .;}	
Vickers Name o	Jamaal f Person	at (305) 504. Area Code Daytime	-3650 . ET	
Enclosed is a check for the	ne following amount:			
S25.00 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 Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	porations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Express Mobile Pressure Washing & Detailing ServiceLLE (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

s of Organization for this Limited Liability Company were filed on 4/22/2021 and assigned

The Articles of Organization for this Limited Liability Company	were filed on $\frac{4/22/2021}{}$ and assigned
Florida document number L 21000187714	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab Express Mobile Pres The new name must be distinguishable and contain the words "Limited Liabile"	ility company here:
Express Mobile Pres	sure Wash LLC - E
The new name must be distinguishable and contain the words "Limited Liabit	
Enter new principal offices address, if applicable:	2260 NW 52nd St 00 Miani, FL 33142
(Principal office address MUST BE A STREET ADDRESS)	M.ani, FL 33142
Enter new mailing address, if applicable:	2260 NW 520d St
• • • •	2260 NW S2nd St Miami, FL 33142
(Mailing address MAY BE A POST OFFICE BOX)	111 am; FL 33110
D. If amonding the registered execut and/or registered office.	address on our records entenths name of the new resistance
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, enter the name of the new registered
Name of New Registered Agent:	
_	
New Registered Office Address: 266	0 NW 52nd St
	Enter Florida street address
$\underline{N_{16}}$	City , Florida 33142 Zip Code
	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 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

Title	Name	Address	Type of Action
			🗖 Add
			Remove
			□Change
			□Add
			□Remove
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	Signatur	e of a member or aut	horized representa	live of a member		_
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Filing Fee: \$25.00