

121 000236841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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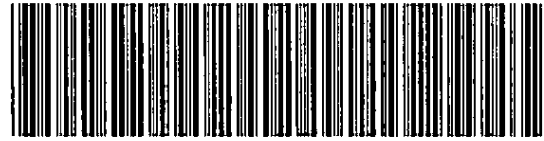
(Business Entity Name)

(Document Number)

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2021 FEB 28 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

MAR - 8 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sharpe's Pressure Washing Service 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:

Charles T Sharpe

Name of Person

Sharpe's Pressure Washing Service LLC

Firm/Company

438 Bascom Ct

Address

Polk City, Florida 33868

City/State and Zip Code

SharpeLawnandPressureWashing@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Sharpe

863 588-5426

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration 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**

FILED

2021 FEB 28 PM 2:38

Sharpe's Pressure Washing Service LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on May 21, 2021 and assigned
Florida document number L21000236841

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Sharpe's Lawn Care & Pressure Washing Service 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:

438 Bascom Ct

(Principal office address MUST BE A STREET ADDRESS)

Polk City, FL 33868

Enter new mailing address, if applicable:

438 Bascom Ct

(Mailing address MAY BE A POST OFFICE BOX)

Polk City, FL 33868

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 Office Address:

Enter Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Charles Sharpe	438 Bascom Ct	<input checked="" type="checkbox"/> Add
		Polk City, FL 33868	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Charles Sharpe	438 Bascom Ct	<input checked="" type="checkbox"/> Add
		Polk City, FL 33868	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Sharpe's Lawn Care & Pressure Wa	438 Bascom Ct	<input checked="" type="checkbox"/> Add
		Polk City, FL 33868	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Sharpe's Lawn Care & Pressure Wa	438 Bascom Ct	<input checked="" type="checkbox"/> Add
		Polk City, FL 33868	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

New e-mail address for correspondence is:

SharpeLawnandPressureWashing@gmail.com

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated February 8, 2022



Signature of a member or authorized representative of a member

Charles T Sharpe

Typed or printed name of signee

State of Florida

Department of State

I certify from the records of this office that SHARPE'S PRESSURE WASHING SERVICE LLC is a limited liability company organized under the laws of the State of Florida, filed on May 21, 2021, effective May 20, 2021.

The document number of this limited liability company is L21000236841.

I further certify that said limited liability company has paid all fees due this office through December 31, 2021 and that its status is active.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Thirteenth day of September,
2021*



Randy R. Lee
Secretary of State

Tracking Number: 8820456846CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>