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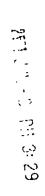
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

STARFIS SUBJECT:	H CLEANING SOLUTIONS	LLC	
30babe1	Name of Li	mited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	
	BRITTANY DAVIS		
		Name of Person	<del></del>
	STARFISH CLEANING	SOLUTIONS LLC	
		Firm/Company	
	3824 WILLIE EARL SI	R DRIVE	
		Address	
	LAUREL HILL, FL 32	2567	
		City/State and Zip Code	
	E-mail address:	to be used for future annual report no	tification)
For further information of	concerning this matter, please o	all:	
BRITTANY DAVIS		850 5336199	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S	Section	Street Address: Registration Se	
Division of C	orporations	Division of Cor	rporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### STARFISH CLEANING SOLUTIONS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 06/03/2021 and assigned Florida document number L21000276288 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: BRITTANY DAVIS Name of New Registered Agent: 3824 WILLIE EARL SR DRIVE New Registered Office Address: Enter Florida street address LAUREL HILL

## 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.

City

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

Title	Name	Address	Type of Action
AMBER . 50 %	ARCHILLIUS PERRY	117 GRAND PRIX DR	
		CRESTVIEW, FL 32536	□Remove
			<b>Ξ</b> Chaπge
MGR 50%	BRITTANY DAVIS	117 GRAND PRIX DR	<b>≣</b> Add
		CRESTVIEW, FL 32536	Remove
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(If an effectiv <u>Note:</u> If th	date, if other than e date is listed, the dat the date inserted in the s effective date on t	e must be specific iis block does n	and cannot be pri	or to date of filing	or more than 90 day	(optional) s after filing.) Pursua ts, this date will no	nt to 605.02 t be listed
the record specord is filed.	ccifies a delayed eff	ective date, but	not an effective	time, at 12:01 a	i.m. on the earlier	of: (b) The 90th c	lay after th
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