121000289425

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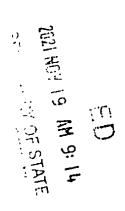
A. RIVERS

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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	Bird's Clea	ning Service LLC		·
SOM	C1.	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Filing Yolanda		
		ZenBusiness Inc	Name of Person	
		5511 Parkcrest Dr., Suite 1	Firm/Company 103	
Austin, TX		Austin, TX 78731	Address	
		fulfillment@zenbusiness.co	City/State and Zip Code om	
		E-mail address: ()	to be used for future annual report notif	ication)
For furt	her information c	oncerning this matter, please ca	all:	
Filing \	Yolanda		844 493-6249 at ()	
	Name o	f Person		e Telephone Number
Enclose	d is a check for th	ne 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bird's Cleaning Service LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our record limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Co. Florida document number L21000289425	mpany were filed on 06/22/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LEC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addre		enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	S F D
	Fla	7 9 9 11 orida 7 A 1
	City	Yip 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Dale Edward Bird	850 Arroyo Parkway Ormond Beach, FL 32174	■ Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			□ Remove
			Change
			Remove
			Change
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Effective date, if other than the date of filing:		
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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. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed. Dated Signature of a member or authorized representative of a member		
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Filing Fee: \$25.00