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COVER LETTER

TO: Registration S Division of Co			
CHINACOTE	G BY EVIS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	EVELIO OTERO		
		Name of Person	
	CLEANING BY EVIS, LI	LC	
		Firm/Company	
	20776 NW 41ST AVENU	E RD	
		Address	
	MIAMI GARDENS, FL 3	3055	
		City/State and Zip Code	
	CLEANINGBY.EVIS@YA		
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
EVELIO OTERO		305 934-7602 at ()	
Name (of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	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 Addre Registration		Street Address: Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 633		The Centre of T	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEANING BY EVIS. 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 $\frac{06/23/2021}{1}$ 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 "LLC." 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 im familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Ordif 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	YUSLAY GOMEZ	20776 NW 41ST AVENUE RD	≣ Add
		MIAMI GARDENS, FL 33055	□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		🗆 Add	
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If amending any other informat	,		··· , ································
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E. Effective date, if other than the of (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applica	o date of filing or more than 90 ble statutory filing requirem	(optional) days after filing.) Pursuant to 605.0207 (ents, this date will not be listed as t
f the record specifies a delayed effective ecord is filed.	date, but not an effective tir	ne, at 12:01 a.m. on the earl	ier of: (b) The 90th day after the
OCTOBER 4TH	2022		
Dated	2		
	Signature of a member or autho	ized representative of a member	r

Typed or printed name of signee