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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|----|
| SUBJECT: Always Clean 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: | |
| Leishka M. Fred Sanchez Name of Person | |
| Always Clean LLC Firm/Company | |
| 1370 Raintree bnd Apt 106 | |
| Clermont Fl 34714 City/State and Zip Code | |
| alway clean dermont agmil.com. E-mail address: (to be used for future annual report nortificación) | |
| For further information concerning this matter, please call: | |
| Leishka M. Fred Sanchez at (407) 912-6638 Name of Person Area Code Daytime Telephone Number | Ç, |
| Enclosed is a check for the following amount: | |
| □ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status (additional copy is enclosed) □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee. 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

A V

| - Always C | lean L | C_{-} | | | |
|---|--|---------------------------------------|---------------------|---------------------|----------------|
| (Name of the Lim | ited Liability Company as (A Florida Limited Liabil | it now appears on our ity Company) | r records.) | | |
| The Articles of Organization for this Limited I | Liability Company were | e filed on 06 | 3 0 200 | and assigned | d |
| Florida document number <u>L2100030</u> | 01217 | 1 | | . | |
| This amendment is submitted to amend the fol | llowing: | | | | |
| 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 Co | ompany," the designation | on "LLC" or the abi | previation "L.L.C." | |
| Enter new principal offices address, if appli | cable: | | | | |
| (Principal office address MUST BE A STRE | ET ADDRESS) | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| Enter new mailing address, if applicable: | | | | | |
| (Mailing address MAY BE A POST OFFICE | | | | | |
| | | | | ··. • | |
| B. If amending the registered agent and/or agent and/or the new registered office addresses | registered office address here: | ess on our records, | , enter the name | e of the new reg | <u>istered</u> |
| Name of New Registered Agent: | Leishko | M. Fra | ed Sa | nchez | |
| New Registered Office Address: | 1370 R | AINTRE C | | Apt | 106 |
| | Clermox | City | | 34714 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> | Address | Type of Action |
|--------------|-----------------|------------------------|----------------|
| MGR | Leishka M. Fred | 1370 Paintree band Apt | NO SAdd |
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