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FILED 2024 SEP 15 PM 3: 59

## **COVER LETTER**

TO:

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TO:	Registration Se Division of Cor			
Orinta	· CT	Duck Duct Cleaning LLC		
SUBJE	.CI:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			Simon Alejo	
			Name of Person	· · · · · · · · · · · · · · · · · · ·
			Duck Duct Cleaning LLC	<del></del>
			Firm/Company	
		18053	3 Pines BLVD, Suite 310	
		· · · · · · · · · · · · · · · · · · ·	Pembroke Pines, FL 33029 City/State and Zip Code	<del> </del>
			uckductair@gmail.com	
			to be used for future annual report no	otification)
For fur	ther information c	oncerning this matter, please c	all:	
	Simon Alejo		ar( <u>354</u> )	08-6823
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>≥</b> \$2.	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section Porporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee roe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 SEP 16 PM 3:59

Zip Code

	Duc	ck Duct Cleaning LLC	•	
	(Name of the Limited Li (A Fl	ability Company as it now appea lorida Limited Liability Company)	rs on our records.)	
he Articles of Organization fo	or this Limited Liabili	ity Company were filed on	07/27/2021	and assigned
lorida document number	L21000338785	·		
his amendment is submitted t	o amend the followin	g:		
a. If amending name, enter (	the new name of the	limited liability company he	ere:	
Duck Duct Air LLC				
he new name must be distinguishab	ole and contain the words	"Limited Liability Company," the d	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices a	ddress, if applicable	:		
Principal office address MUS	ST BE A STREET A	DDRESS)		<u> </u>
				<u>_</u>
Inter new mailing address, if	f applicable:		<u> </u>	
Mailing address MAY BE A	POST OFFICE BOX	<u> </u>	<u> </u>	<u> </u>
3. If amending the registered			ecords, <u>enter the na</u>	ime of the new registe
gent and/or the new register	red office address he	<u>ere</u> :		
Mana af Mana Danier	and Assents			
Name of New Registe	ered Agent:			
New Registered Offic	ce Address:	P . P!	and a survival alaboration	
		Enter Flo.	rida 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 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 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
			□Add
			□Remove
			Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			□ Change
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			□Remove
			□Change
			□Add
			Remove
			□ Changa



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Note: If	date, if other than the date of filing:
he record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	September 10 . 2024
	Sinon Mas
	Signature of a member of authorized representative of a member
	Simon Alejo
	Typed or printed name of signee

Filing Fee: \$25.00