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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNTING2EASY CORP

Account Number : 320150000067 Phone : (786)487 1398 Fax Number : (305)503-9351

Enter the email address for this business entity to be used for futile annual report mailings. Enter only one email address please.

intowaccounting2easy.com
Email Address:

9 PM 2:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LD ORDER AND CLEANING LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LD ORDER AND CLEANING LL	.c		2021 SEC ALL	
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny ay it now appears on our recor liability Company)	OCT OCT	-⊓
The Articles of Organization for this Limited L. Florida document number <u>L21000359692</u>	iability Company	were filed on August 10, 2021	2021 OCT 1 SE PM 2: SECRETAR SECT STA ALL NHASSEE FLOR	FILED
This amendment is submitted to amend the foll	owing:		: 55 RIDA	
A. If amending name, enter the new name of	of the limited liab	ility company here:	·	
N/A				_
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLI	C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applie	cable:			_
(Principal office address MUST BE A STREET ADDRESS)		7184 W 2ND LANE		_
		HIALEAH, FL 33014		_
Enter new mailing address, if applicable:		7184 W 2ND LANE		
(Mailing address MAY BE A POST OFFICE	BOX)	HIALEAH, FL 33014		_
B. If amending the registered agent and/or	registered office	address on our records, <u>ente</u>	r the name of the new regis	tered
agent and/or the new registered office addre	<u>ss nere</u> :			
Name of New Registered Agent:	N/A			
New Registered Office Address:	7184 W 2ND	LANE		
		Emer Florida street addre		
	HIALEAH,	, F	Torida <u>33014</u>	_
		City	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>		

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

1-305-503-9351

From: Accounting2Easy Corp

(((H21000389300 3)))

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

Page: 3 of 4

Title	Name	Address	Type of Action
			DAdd
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