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	(Requestor's Name)	
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1	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
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Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sunny's Commercial Cleaning 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:
Anne Caroline Weinand
Sunuy's Commercial Cleaning
2505 Arabian Trail
Orm and Beach Fl 32174 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Karsten Weinand at (386) 456 6437 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee

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

Sunny's Commercial Cleanium 4C

(A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 9/13/20	
Florida document number <u>L2 00 04 059 7/</u>	2023 JU!
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	26
Johnson's floor care LLC	
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or t	
Enter new principal offices address, if applicable:	2
(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 agent and/or the new registered office address here:	name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	
Florid	a

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 Changing Registered Agent, Signature of New Registered Agent
TO CHARRING REGIOCOLU ARCHE SIRNALUIE DI NEW REVILLETEU ARCH

Zip Code

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
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ective date, if other than the date of filing:			(option	al)
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ecord specifies a delayed effective date, but not an effective	e time, at 12:01 a	ı.m. on the earlie	r of: (b)	The 90th day after th
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