L21000498982

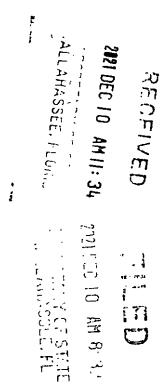
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
MAILOUT

Office Use Only



900377213559

12/10/21--01005--003 **25.00



Y SULKER DEC 13 2021

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

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: Derrick Zio Name of Person	SUBJECT: TYCA	Sure Island (Cleaning Compa	ny L.L.C.
Please return all correspondence concerning this matter to the following: Derrick Zio		Name of Limi	ted Liability Company	
Derrick Zio Name of Person TrenSure Island Cleaning Company L.L.C. Firm/Company Ill 60 1St St E Address Treasure Island FL, 33706 City/State and Zip Code Treasure island Cleaning Services & gma, 1. Com Bental address (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person at (The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Treasure Island (leaning company L. L. C. Finn/Company III 60 1St St E Address Treasure Island FL, 33706 City/State and Zip Code Treasure Island Cleaning Services & gman1. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person at (Please return all correspo	ndence concerning this matter	to the following:	
Treasure Island, FL, 33706 City/State and Zip Code Treasure island Cleaning Services & gmail. Com E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person				
Treasure Island FL, 33706 City/State and Zip Code Treasure island Cleaning Services a gmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code Daytime Telephone Number Section Section Section Section Status & Certificate of Status & Ce		Trensure	ISIME Cleaning	Company L.L.C.
Treasure is land Cleaning Services (a, gmail. Come is a disconsistent of future annual report notification) For further information concerning this matter, please call: Same of Person		1116015+	SHE 🕏	
For further information concerning this matter, please call: at ()		Treasure	ISlund, FL, Scity/State and Zip Code	33706
For further information concerning this matter, please call: at ()		Treasure is lo E-mail address:	and Cleaning Service to be used for future annual report notification	Ces a gma, 1. Com
Enclosed is a check for the following amount: \$\Bigsquare \text{S55.00 Filing Fee & S60.00 Filing Fee.} \text{Certificate of Status} \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is	For further information c			
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Name o	f Person	at () Area Code Daytime	e Telephone Number
Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations	Enclosed is a check for the	he following amount:		
Registration Section Registration Section Division of Corporations Division of Corporations	□ \$25.00 Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy
Division of Corporations Division of Corporations				etion
	Division of C	Corporations	Division of Cor	porations

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Treusure Island Cleaning Company L. L. C. (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 $\frac{11/19/2021}{L21000498982}$ and assigned florida document number $\frac{L21000498982}{L21000498982}$.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
Treasure Island Cleaning Services LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LEC" or the abbreviation "L.L.C"	
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)	
	e Torond
3. 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:	Stefen
Name of New Registered Agent:	
Name Paralytomed Office Address:	
New Registered Office Address: Enter Florida street address	
, Florida	
City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	
Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply wi 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 being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability	1

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
		·	☐ Change
			□Add
		□Remove	
			□Add
			□Remove
			□Change
			\ \ _Remove
			□Change

Note Note	tive date, if other than the date of filing:
cord is	
Date	12/10/2021
	Signatup of a member or authorized representative of a member
	Signatup of a member or authorized representative of a member
	Derrick 2io

Filing Fee: \$25.00