## 121000527525

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## **COVER LETTER**

TO:

то:	Registrat Division o					
CHR HE	CRD	N of Gr	reater Tampa, LLC			
SUBJE	CI:		Name of Lin	nited Liability Company		
The encl	losed Artic	les of A	mendment and fec(s) are sub	omitted for filing.		
Please re	eturn all co	rrespon	dence concerning this matter	to the following:		
			Greg Mahler			
				Name of Person		
			Mahler & Co.			
				Firm/Company		
			10931 Colubrina Drive			
				Address		
			Venice, FL 34293			
				City/State and Zip Code		
			GMahler@MahlerCPA.com	n		
			E-mail address: (	to be used for future annual report in	otification)	
For furth	er informa	ition cor	neerning this matter, please e	all:		
Greg Ma	ahler CFI (	CFII		317 3199018 at ()		
	N	lame of I	Person		ime Telephone Number	
Enclosed	l is a check	for the	following amount:			
<b>≅</b> \$25.	00 Filing F	řec	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	Mailing A Registrat Division P.O. Box Tallahas:	tion Se of Co c 6327	rporations	Street Address: Registration S Division of C The Centre of 2415 N. Mon	orporations	0

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRDN of Greater Tampa, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000527525</u>	were filed on December 14, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
DKM Cleaners, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	,	VATASON
(Principal office address MUST BE A STREET ADDRESS)	<u>12520 HOOS</u>	(En IDAA
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	5 NW2	JAN 24 AM
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	me of the new registere
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street address	
	, Florida	
-	City	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>	<u>Address</u>	Type of Action
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			□Change
			□Remove
			Change
			□ Add  Remove  A SSE □ □ Change  CRESC □ CRESC □ Add
			SS Change
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