L22000017713

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07/19/22--01018--005 ++25.00

FILED 2022 JUL 19 AN IO: 16 SECRETARY OF STATE



COVER LETTER

TO: Registration Section Division of Corporations

PRESTANCE PRESSURE CLEANING L.L.C SUBJECT:

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:

JEAN ALCIME

Name of Person

PRESTANCE PRESSURE CLEANING L.L.C

Firm/Company

6320 NW 23RD STREET

Address

SUNRISE, FL 33313

City/State and Zip Code

JEANRENALDALCIME@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 JEAN ALCIME
 at (_____)
 504-3211

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> 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

PRESTANCE PRESSURE CLEANING 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 $\frac{01/10/2022}{2000017713}$ and assigned Florida document number $\frac{L22000017713}{2000017713}$

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JEAN HOME REPAIR LLC

The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:	6320 NW 23RD STREET	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(Principal office address MUST BE A STREET ADDRESS)	SUNRISE, FL 33313	b22 SEC
	·	
		AHA 59
Enter new mailing address, if applicable:	6320 NW 23RD STREET	SSO A
(Mailing address MAY BE A POST OFFICE BOX)	SUNRISE, FL 33313	E SI G
		EAT 6

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	ress
	, ¹ Cițy	Florida 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Change
			🗆 Add
			Change
			🗆 Add
		. <u> </u>	□Add
			□Change
		. <u>.</u>	🗆 Add
			Change
			🗆 Add
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	· ·	
đ	Signature of a member or authorized representative of a member	
IFAN	ALCIME	