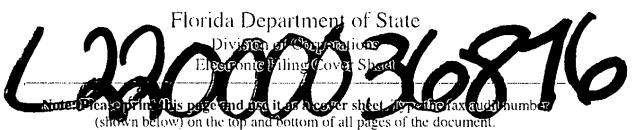
Division of Conjorations

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To:

Division of Corporations

fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 : (844)449-3624 Fax Number : (844)449-3624

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

Email Address:____



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MIKE MOBILE DETAIL & PRESSURE WASHING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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FEB - 2 2024

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Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H24000043180 3

Mike Mobile detail & pressure washing LLC (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number 1.22000036876 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability	were filed on 01/19/2022 and assigned
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6146 riverbrooke dr
(Principal office address MUST BE A STREET ADDRESS)	panama city, FL 32404
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6146 riverbrooke dr panama city, FL 32404
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registered
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

02/01/24 06:18AM 5125970678

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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
AMBR	Michael sims JR	6146 riverbrooke dr	
		panama city , FL 32404	□Remove
			
			□Add
			Remove
			[]Change
			OAdd
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<u>ote:</u> If t	date, if other t ve date is listed, the the date inserted is effective date	in this block doe	s not meet th	ie applicable	te of filmg or mo statutory filing	(option re than 90 days after f requirements, this	nal) iling.) Pursuant to 60 date will not be lis	5.0207 (ited as (
record sp is filed.		l effective date, l	out not an eff	lective time,	at 12:01 a.m. o	n the earlier of: (b)	The 90th day aft	er the
Jar ated	nuary 31st							
	/s/ Michael s	ins IR						
	75. Michael s				representative of			

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