K22000060124

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SECRETARY OF STATE

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COVER LETTER

	Registration Se Division of Cor			•
cup ica	·	ean Services, LLC	•	
SUBJEC	.1: <u>_</u>	Name of Lim	Name of Limited Liability Company It and fee(s) are submitted for filing. It are submi	
The enck	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Andrea Touchton		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		Country Clean Services, L.	LC	
			Firm/Company	
		4343 Oak Lane		
		1-11-1-1-1-1	Address	
		Milton, FL 32583		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notil	tication)
For furth	er information c	oncerning this matter, please ca	all:	
Andrea 1	Touchton			
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed	l is a check for th	ne 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)
			0	

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

FILED

Country Clean Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

TALLALLY OF STATE The Articles of Organization for this Limited Liability Company were filed on $\frac{02/04/2022}{1}$ and assigned Florida document number L22000060124 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___ City 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, 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
MGR	Brittany Broxson	5088 Santa Gertrudes Drive	□Add
		Milton, FL 32583	Remove
			Change
			□ Remove
			Change
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		April 4, 2022				
ffective date, if other than that an effective date is listed, the date in	ie date of filin just be specific an	ıg:	date of filing or mo	ce than 90 days after	nal) iling.) Pursuant to 605.0	0207
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record specifies a delayed effec- is filed.	ive date, but no	t an effective tim	e, at 12:01 a.m. oi	n the earlier of: (b)	The 90th day after	tne
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Trob	Signature of a	member or authori	zed representative of	f a member		

Filing Fee: \$25.00