N22000082086

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| , | , | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| 00623 | | |

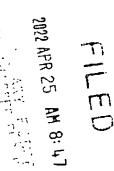
Office Use Only



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04/25/22--01027--016 **25.00

LLC amend



A RAMSEY JUN 1 5 2022

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Creenleaf Clean, L.C. 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: |
| Jennifer Greenleaf |
| Greenlast Clean, LLC. |
| 18981 US. Hahnry 441#297 |
| Mount Obra FL 32757 City/State and Zip Code |
| erecheaf — y nifer a Jahu Com E-mail address (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Tennfer Greenleaf at 456 0855 Name of Person at 456 0855 Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

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

| Greenleaf Clean, a | LC. 2022 APR 25 AM 8: 47 |
|--|--|
| (Name of the Limited Liability Compar (A Florida Limited L | y as it now appears on our records.) iability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number L22000 82086 | were filed on $02/21/2022$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabi | lity company here: |
| The new name must be distinguishable and contain the words "Limited Liabili | ty Company," the designation "L.L.C." 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 a agent and/or the new registered office address here: | ddress on our records, enter the name of the new registered |
| Name of New Registered Agent: | |
| 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 agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p | performance of my duties, and I am familiar with and |

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> | Address | Type of Action |
|--------------|--------------------|--|----------------|
| AMBR | Jennifer Greenleaf | 24614 Calusa Blvd. | X Add |
| | | 24614 Calusa Blvd. Eustis, FL 32736 | □Remove |
| | | | □Change |
| | | | |
| | | | □Remove |
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| . II AM | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| Note: | ive date, if other than the date of filing: 4/18/202 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records. |
| f the record ecord is fi | rd 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 led. |
| Dated | 4/18/2022 |
| | Signature of a member or authorized representative of a member |
| | Innific Orcanical |
| | Typed or printed name of signee |

Filing Fee: \$25.00