K22000116712

| (Req | uestor's Name) | |
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| (Addı | ress) | |
| (Addi | ress) | |
| (City/ | /State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | iness Entity Nar | me) |
| (Doc | ument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Fi | iling Officer: | |
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Office Use Only

A. RIVERS

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COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

| | Registration Se Division of Cor | | | | |
|-----------------|------------------------------------|--|---|--|--|
| SUBJEC | | GUZ CLEANING SERVICES LLC | | | |
| SUBJEC | Name of Limited Liability Company | | | | |
| The encl | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please re | turn ail correspo | ndence concerning this matter | to the following: | | |
| | | ANDREA GUZMAN PER | EZ | | |
| | | | Name of Person | | |
| | | GUZ CLEANING SERVICES LLC | | | |
| | | | Firm/Company | | |
| | 92 POLK STREET | | | | |
| | Address | | | | |
| | | City/State and Zip Code GUZMANANDREA706@GMAIL.COM E-mail address: (to be used for future annual report notification) | | | |
| | | | | | |
| | | | | | |
| For furth | er information c | oncerning this matter, please of | · | ication | |
| | RYS VAZQUEZ | - | 917 272-3494 | | |
| | Name o | f Person | at () Area Code Daytime | : Telephone Number | |
| Enclosed | tie a chock for th | ne following amount: | | | |
| | | - | El ess on river respective | ₩ 560.00 EEE . For | |
| LJ 3 25. | 00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$\infty\$ | |
| | Mailing Addres | <u>s:</u> | Street Address: | | |
| | Registration S | Section | Registration Sec | | |
| | Division of C | orporations | Division of Cor | porations | |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GUZ CLEANING SERVICES LI | | | | | |
|---|---|---|-----------------|------------|---------|
| (Name of the Lim | ited Liability Company as (A Florida Limited Liabili | it now appears on our records.) ty Company) | | | |
| The Articles of Organization for this Limited | Liability Company were | e filed on <u>03/07/2022</u> | | and assi | gned |
| lorida document number L22000116772 | · | | | | |
| his amendment is submitted to amend the fol | llowing: | | | | |
| . If amending name, enter the new name | of the limited liability | company here: | | | |
| ne new name must be distinguishable and contain the | words "Limited Liability Co | ompany," the designation "LLC" or t | he abbrevi | ation "L.I | C." |
| nter new principal offices address, if appli | icable: | | | | |
| Principal office address MUST BE A STRE | ET ADDRESS) | | | | |
| inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE | <u></u> | | | | |
| . If amending the registered agent and/or gent and/or the new registered office addr | | ess on our records, enter the | name o <u>f</u> | the new | registe |
| Name of New Registered Agent: | ANDREA GUZMA | 8 PEREZ | | | |
| New Registered Office Address: | 92 POLK STREET | | ÷. |):[2] (| · · · |
| | | Enter Florida street address | | -3 | |
| | FREEPORT | , Florid: | a <u>32439</u> | رن درا | ·. |
| | 1 | City | . Z | ip Code | : 1 1 |

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 |
|--------------|---------------------|----------------------------------|----------------|
| MGR | ANDREA GUZMAN PEREZ | 92 POLK STREET FREEPORT FL 32439 | ■Add |
| | | | □Remove |
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| ffective d | ate, if other than the date of filing: (optional) |
| an effective | tate, if other than the date of filing: |
| | effective date on the Department of State's records. |
| | |
| | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed. |
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| natud. | 10/01 . 22 . |
| ,ateu | |
| _ | (Inch Gronge Tors |
| | Signature of a member or authorized representative of a member |
| | ANDREA GUZMAN PEREZ |
| - | Typed or printed name of signee |