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(R	equestor's Name)	
(A	ddress)	
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(Ċ	ity/State/Zip/Phone	#)
(В	usiness Entity Name	e)
()	ocument Number)	
Certified Copies		of Status
Special Instructions to	Filing Officer:	
Title		
	Office Use Only	



04/11/22 -01020 -014 **25.00

SECRETARY OF STATE

A. BUTLER MAY 2 3 2022

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Clean and Orderl ed Liability Company 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:



For further information concerning this matter, please call:

elisso at (<u>756)</u><u>797-7686</u> Area Code Daytime Telephone Number Name of Person

Enclosed is a check for the following amount:

\$25.00 Filing Fee

S30.00 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 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

, ARTICLES (OF AMENDME	NT
	TO	
ARTICLES	F ORGANIZAT	IUN
	OF	FILED
Clean and Drae (Name of the Limited Liability Co (A Florida Lim	ompany as it now appear ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	<u>^</u>	arch 17,2002 Eand fassigned
Florida document number <u>L 22000133705</u> .		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "Limited I	Liability Company," the de	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u>S)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our re	cords, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address	Enter Flor	da street address
	Ciŋ [,]	, 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	Melissa Paul	3365 Cabaret lane Margate, F137063	Add
			Change
Owner	Melissa Paul	3365 Cabaret In M P1,33063	arga Christ
		<u> </u>	🗆 Change
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.D. If amending any other information, enter change(s) here: (Attach additional sheets. if necessary.)

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E. Effective date, if other than the date of filing: ______ (optional) (If an effective 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)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

document's effective date on the Department of State's records.

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	april	4th , 2022	
	1	Melissa Rate	
		Signature of a member or authorized representative of a member	
		Melissa Paul	
		Typed or printed name of signer	

Typed or printed name of signee

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2022

YELSSA PAUL 6665 CABARET LANE MARGATE, FL 33063

SUBJECT: CLEAN AND ORDERLY LLC Ref. Number: L22000133705

We have received your document for CLEAN AND ORDERLY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 322A00010369