## L22000138151

| (Requestor's Name)                      |
|---|
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| (Address)                               |
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| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| LLC NC                                  |

Office Use Only



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2025 HAY -6 AH 8: 30 SECRETATIV OF STATE TALLAHASSEE, FI

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## **COVER LETTER**

| TO: Registration Se<br>Division of Cor       |  |   |   |                                       |                      |
|--|--|---|---|---------------------------------------|----------------------|
| SUBJECT: <u>501</u>                          | Clean LLC                                    |   |   |                                       |                      |
| NOBJECT:                                     | Name of Limi                                 | ted Liability Company   |   |                                       |                      |
| The enclosed Articles of                     | Amendment and fee(s) are subr                | nitted for tiling.  |   |                                       |                      |
|  | ndence concerning this matter t              |   |   |                                       |                      |
|  | Alexo  | nder J. Hamilto   | <u> </u>  |                                       |                      |
|  | 501  | Clean LLC Firm/Company  |   |                                       |                      |
|  | 3150 SK                                      | yhowk Dr. (Mass) Address  |   |                                       |                      |
|  |  | City/State and Zip Code   |   | SECRETARY OF STATE<br>TALLAHASSEE, FL | 2025 MAY -6 AM 8: 30 |
|  | E-mail address. (c                           | inham@amail. (  | <u>Com</u><br>tication)   | HAS:                                  | 6                    |
| For further information c                    | oncerning this matter, please ca             | II:   |   | SEE<br>SES                            | AH 8                 |
| Alexander<br>Name o                          | T. Hamilton                                  | at ( <u>321</u> ) <u>759 -</u><br>Area Code Daytim                        | 4832<br>e Telephone Number  | FL<br>FATE                            | 30                   |
| Enclosed 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 I<br>Certificate of<br>Certified Copy<br>(additional copy) | Status &<br>y                         |                      |
| Mailing Address Registration 9 Division of C | Section<br>orporations                       | Street Address:<br>Registration Sec<br>Division of Cor<br>The Contra of T | porations   |                                       |                      |
| P.O. Box 632                                 | . /  | The Centre of T   | ananassee   |                                       |                      |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 501 Clean LLC   |  |                             | <del></del>           |
|---|--|-----------------------------|-----------------------|
| (Name of the Limited Liability Cor<br>(A Florida Limit  | mpany as it now appears on e<br>ted Liability Company) | our records.)               |                       |
| The Articles of Organization for this Limited Liability Compa<br>Florida document number <u>L22000138151</u> .                                  | any were filed on <u>03</u>                            | 121/2022                    | _ and assigned        |
| This amendment is submitted to amend the following:   |  |                             |                       |
| A. If amending name, enter the new name of the limited I  Handy Hami LLC  The new name must be stinguishable and contain the words "Limited L." |  | ation "LLC" or the abbri    | rviation "L.L.C."     |
| Enter new principal offices address, if applicable:   |  |                             |                       |
| (Principal office address MUST BE A STREET ADDRESS)   | 2  |                             | 2025<br>SEC           |
| Enter new mailing address, if applicable:   |  |                             | HAY -6 RETARY         |
| (Mailing address MAY BE A POST OFFICE BOX)  |  |                             | AH 8: 30<br>CF STATI  |
| B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:                                 | ce address on our record                               | ds, <u>enter the name (</u> | of the new registered |
| Name of New Registered Agent:   |  |                             |                       |
| New Registered Office Address:  | Enter Florida st                                       | reet address                |                       |
|   |  |                             |                       |
|   | Cay  | , Florida                   | Zip Code              |
| New Registered Agent's Signature, if changing Registered Age  | ent:   |                             |                       |

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> | Name | Address  | Type of Action   |
|--------------|------|----------|--|
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|  | FL                            | 30           |
| If an effective date is listed, the date must be specific and cannot be prior to date of thing or more than 90 day Note: If the date inserted in this block does not meet the applicable statutory filing requiremen document's effective date on the Department of State's records. | ts, this date will not be lis | ted as th    |
| e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier rd is filed.  |                               | er the       |
| Dated 33 April 2025.  Signature of a member or authorized representative of a member   |                               |              |
| Alexander J. Hamilton Typed or printed name of signee  |                               |              |

Filing Fee: \$25.00