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Special Instructions to Fi	ling Officer.	•
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Office Use Only



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COVER LETTER

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Division of Cor			•			
SUBJECT:	UZMane of Lini	inting and c	leaning LLC			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	Josh	Name of Person				
		Name of Person				
		Firm/Company				
	5110 70	Address	2d Apt.25			
	Tall	City/State and Zip Code 2020 Qt 1010000 to be used for future annual report noti	304			
		City/State and Zip Code	<u></u>			
	Yesnia dare	ed zozopicloud.	com			
	E-mail address: (to be used for future annual report noti	fication)			
For further information c	oncerning this matter, please ca	all:				
Yesnia	Caveman	at (ESO) 591 Area Code Daytim	32 <i>8</i>			
Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for the	he 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)			
Mailing Addres		Street Address:	ution			
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 632	27	The Centre of T	Tallahassee			
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EN ED

2022 NOV -7 PM 4:00

Civemane 3	painting and cleant RECRE LAD OF ALL AHASSIT. III
(<u>Name of the Limite</u> (d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number <u>L22000</u> 1	ability Company were filed on $63 - 72 - 2027$ and assigned 39805
This amendment is submitted to amend the follo	wing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:
(Principal office address MUST BE A STREE)	(ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	30.Y)
B. If amending the registered agent and/or re agent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new registered</u> s here:
Name of New Registered Agent:	Yesnia Gurman
New Registered Office Address:	2110 Jackson Bluff 2d Apt. 25 Enter Floridu street address
	Yesnia Gurman 2110 Jackson Bluff Rd Apt. 25 Enter Florida street address Tallahasse 17 Florida 323CH City Zip Code
New Registered Agent's Signature, if changing R	
Lharaha account the appointment as accistance	I manus and the contract of th

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 confine 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 Title Address Type of Action Yesnia Crueman 2110 Jackson Bluff 2d EAdd

APt-25 tallahasse Fi 32304 2)
Toshua (rugman 210 Jackson Bliff Rd Kadd

Apt. 25 talahase fi 32304 □Remove

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ore, ir die	te, if other than ate is listed, the date date inserted in this effective date on the	is diock does no	t meet the a	applicable sta	of filing or mor	e than 90 days requirements	optional) after filing.) l this date w	fursuant to 605.0)207 Las
ecord speci is filed.	fies a delayed effe	ective date, but n	iot an effeci	tive time, at	12:01 a.m. or	the earlier o	f: (b) The	90th day after t	the
	11-7		_ ,	22					
nted		11.4							
ated		Signature of	a member of	r authorized re	presentative o	f a member			

Filing Fee: \$25.00