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COVER LETTER

	egistration Section fvision of Corporations
out our comm	Priority Mobile Detailing and Pressure Cleaning Services LLC
SUBJECT .	Name of Limited Liability Company
The enclos	ed Articles of Amendment and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Covey Oliphant Name of Person
	Priority Mobile Detailing and Ressure Cleaning Service
	2897 NW 9th Court
	Fort lauderdale, Fl. 33311 Cepliphant 86 Damail. Com
	F-mall address: (to be used for future annual report notification)
or further	information concerning this matter, please call:
LOYC	Name of Person at (754) 214 - 9659 Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
□ \$25.00	Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

Priority Mobile Detailing and Pressure Cleaning	
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number <u>L22000 188064</u> .	spany were filed on $4/20/2022$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u></u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address 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 A	egent:
provisions of all statutes relative to the proper and com accept the obligations of my position as registered ager	d agree to act in this capacity. I further agree to comply with the aplete performance of my duties, and I am familiar with and not as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability

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
MBR	Corey Oliphant	2897 N.W. 9th Court Fort Lauderdale, Fl. 333	≡ Add
٠	•	Fort lauderdale, Fl. 333	<u>31</u> □Remove
			□Change
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(If an effer	date, if other than the date of filing:	.07 (3' as the
docume	s effective date on the 19epartificht of State's feedites.	
the record cord is file	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	ie
Dated _	July 0. 2022.	
	Signature of a member or authorized representative of a member	•