## L22000221060

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S. PRATHER

## **COVER LETTER**

	Registration Se Division of Cor			
SUBJEC'	1".	GHT FLORIDA LLC		
SUBJEC	· <u></u>	Name of Lim	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	arn all correspo	ondence concerning this matter	to the following:	
		JAMES A. MATTHEWS		
			Name of Person	
		CLEAN RIGHT FLORID	A LLC	
Firm/Company				<del></del>
		7512 DR. PHILLIPS BLV	D STE 50-305	
		4	Address	
		ORLANDO FL 32819-543	20	
			City/State and Zip Code	
		JAY@MAZDAVI.COM		<del></del>
For furthe	r information c	E-mail address: ( oncerning this matter, please c	to be used for future annual roal:	eport notification)
LEE MAF				1120
	Name o	f Person	at () Area Code	Daytime Telephone Number
Enclosed i	s a check for the	ne following amount:		
<b>■</b> \$25.00	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certificate of Status &
R	<u>lailing Addres</u> Registration S	Section	_	ion Section
	Division of C P.O. Box 632			of Corporations tre of Tallahassee
	allahassee, l			Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEAN RIGHT FLORIDA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

		101 101 101 101 101 101 101 101 101 101
The Articles of Organization for this Limited Liability Company	were filed on MAY 11, 2022	and assigned?
Florida document number L22000221060		2
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
CLEAN-RITE FLORIDA'S #1 CLEANING SERVICE LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	100 A 100 A	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter the r</u>	name of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	l
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and Lo provided for in Chapter 605, F.S.	ım familiar with and Or, if this document is

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
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			□Remove
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. If amending any other i	ıformation, enter c	change(s) here:	(Attach additional she	eets, if necessary.)	
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Effective date, if other t (If an effective date is listed, the Note: If the date inserted document's effective date	date must be specific and this block does not r	d cannot be prior to d neet the applicable	late of filing or more than 90 e statutory filing requires	<b>(optional)</b> Description of the days after filing.) Pursuments, this date will a	uant to 605.0207 (3 not be listed as th
ne record specifies a delayed ord is filed.	effective date, but not	an effective time,	at 12:01 a.m. on the ear	rlier of: (b) The 90th	n day after the
Dated MAY 31		2022			20.
	Signature of a	member or althorize	od representative of a men	774	2022 JUN 21
JAMES A. MA	THEWS		<b>-</b> -		ĹΠ.
		Typed or printed n	ame of signee		AM 9:
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