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April 5, 2023

ANDRE CRAWFORD SR 610 E ZACK STREET STE 110-2228 Tampa A, FL 33598

Re: Document Number L22000247850

The Articles of Amendment to the Articles of Organization for SUPERIOR CLEAN LLC which changed its name to ALL-N-1 IMMACULATE SERVICES, LLC, a Florida limited liability company, were filed on February 7, 2023.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Letter Number: 723A00007766

SHANTELL BROWN Regulatory Specialist II Division of Corporations

COVER LETTER

TO: Registration S Division of Co			
	R CLEAN LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ANDRE CRAWFORD SE	₹	
		Name of Person	
	ALL-N-1 IMMACULATI	ESERVICES, LLC	
		Firm/Company	
	610 E ZACK STREET, S'	TE 110-2228	,
		Address	
	TAMPA, FL 33602		
		City/State and Zip Code	
	ANDRE2CRAWFORD@Y	(AHOO.COM) to be used for future annual report notif	fication)
For further information	concerning this matter, please c		
ANDRE CRAWFORD	-	704 965-0533	
Name of Person			e Telephone Number
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)
Mailing Addre Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations alfahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUPERIOR CLEAN LLC		. <u> </u>
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000247850}{}$.	were filed on May 31, 2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
ALL-N-1 IMMACULATE SERVICES, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	610 E ZACK STREET	
(Principal office address MUST BE A STREET ADDRESS)	STE 110-2228	7-3
	TAMPA, FL 33602	- 1
Enter new mailing address, if applicable:	610 E ZACK STREET	
(Mailing address MAY BE A POST OFFICE BOX)	STE 110-2228	
	TAMPA, FL 33602	
		13

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

ANDRE CRAWFORD SR

TAMPA

610 E ZACK STREET, STE 110-2228

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

___, Florida <u>33602</u> Zip Code

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fective date, if other than the date of filing: m effective date is listed, the date must be specific and cannot be prior to dote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	ate of filing or more than 90 days after filing.) Pursuant to 605.02
ecord specifies a delayed effective date, but not an effective time, is filed.	at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated JANUARY 23 . 2023	
Signature of a member of authorize	A amount of the second of the

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>	Address	Type of Action
MGR	ANDRE CRAWFORD SR	610 E ZACK STREET, STE 110-2228	= Add
		TAMPA, FL 33602	
			□Change
			□Add
			□Remove
			Change
			□Add
			Remove
			, , . ⊡Change
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