

L22000263362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

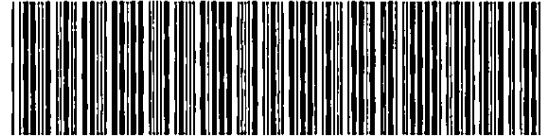
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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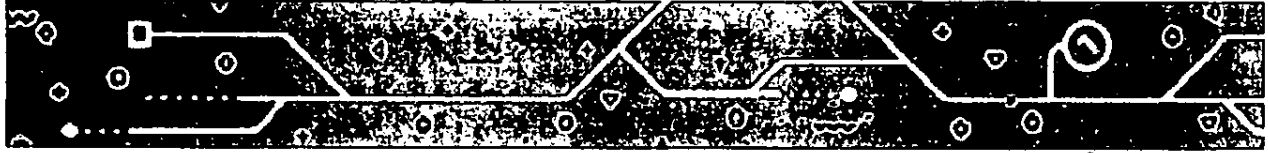
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2022 SEP 19 AM 7:06
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20 2022



zenbusiness

Sep 9, 2022

Florida Secretary of State
Division of Corporations
2415 N Monroe St Suite 810
Tallahassee, FL 32303

RE: Will's Windows, Gutters and Power Washing LLC

To Whom It May Concern:

Attached please find the executed ARTICLES OF AMENDMENT for the above referenced. Please review and file the attached document on a routine basis. Please note that this document is signed with a conformed signature.

PLEASE DO NOT INCLUDE THIS COVER PAGE IN THE FILING EVIDENCE.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc
Attention: Jenny C.
336 E College Ave, Ste 301
Tallahassee, FL 32301

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you.

Jenny C.
ZenBusiness Customer Success

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

Will's Windows, Gutters and Power Washing LLC

2022 SEP 19 AM 7:06

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

The Articles of Organization for this Limited Liability Company were filed on 06/08/2022 and assigned
Florida document number 1.22000263362

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Will's Gutter & Exterior Cleaning LLC

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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 Agent:

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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