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(Requestor's Name)
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(Document Number)
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## **COVER LETTER**

Division of C	orporations			
. Will's Gu	tter & Exterior Cleaning LLC			
SUBJECT:				
The enclosed Articles (	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresponding	pondence concerning this matte	r to the following:		
	William Jimenez			
	- <del></del>	Name of Person		•
	Will's Gutter & Exterior C	Cleaning LLC		
		Firm/Company	<u>.</u>	•
	4036 Amber Road			
	<del></del>	Address		2024 SEC
	Venice, FL 34293			
	<del></del>	City/State and Zip Code	<u> </u>	TARY OF ANIASSE
	anchordownpressurewashin	g@gmail.com (to be used for future annual report noti-	·	S 28 P.
For further information	concerning this matter, please c		псаноп)	2024 JUN 28 PM 2: 02 SECRETARY OF STATE TALLAHASSEE FL
Christine Arciola		941 310-4151		7 7 2
Name	of Person	at () Area Code Daytime	e Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
Mailing Addre Registration Division of O	Section	Street Address: Registration Sec Division of Corp		

P.O. Box 6327

 $e_{k+1,k+2,k+3} = e^{-k (k+1) - k (k+1)}$ 

Registration Section

TO:

Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

Wills Guffer + Eterior Cleaning, (UC) (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	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "U.C" 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:  Sauce So D	
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:  HOBE HUBER RA  Enter Florida street address  Zip Code	red

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>	Name	Address	Type of Action
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			Change
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		SECRETARY OF STALLAHASSEE	2021 Remove a UNI MARS 200 hange
		SSEE FL	_ ⊑-oodd — *
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should be changed to 4036	Ambar Dand Varion El. 3	1203			
Should be changed to 4050	Timber Road Vehice PL 3				
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fective date, if other than then effective date is listed, the date in	e date of filing:	prior to date of filing o	optio	nal) filing \ Pursuant to	605 0 <b>2</b> 07
ote: If the date inserted in this	lock does not meet the ap	plicable statutory f	iling requirements, this	date will not be	listed as
cument's effective date on the	Department of State's reco	ords.			
ecord specifies a delayed effect is filed.	ve date, but not an effecti	ve time, at 12:01 a.	m. on the earlier of: (b)	The 90th day a	fter the
June 10	2024				
William Jim		<del></del> .			
	1818M1				

Filing Fee: \$25.00