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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: El Brillo M	lobile Clean & Detail, LLC Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Karel Mulet		
		Name of Person	2
	El Brillo Mobile Clean &	Detail, LLC	2022 Jiil 20
		Firm/Company	ניו
	14963 Old Pointe Rd		2 And 10: 5
		Address	
	Tampa, FL 33613		;. C
		City/State and Zip Code	
	karel@elbrillocleananddeta		
		to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
Karel Mulet		at (813) 450-7119	
Name of Person			Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 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 Address Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company of (A Florida Limited Liab	can Detail LL as it now appears on our records.) ility Company)	<u></u>	
The Articles of Organization for this Limited Liability Company we	ere filed on 6/14/2022	and as	signed
Florida document number L22000271729			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	y company here:		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the a	bbreviation "L	L.C."
Enter new principal offices address, if applicable:	-	25	<u></u>
(Principal office address MUST BE A STREET ADDRESS)		22 11	
_		. <u>분</u>	
		0	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		<u>्</u>	
-			
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	lress on our records, <u>enter the nan</u>	ne of the ne	w registered
Name of New Registered Agent:			
New Registered Office Address:	<u></u>		
	Enter Florida street address		
	, Florida	7: 2: 1	
	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 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
MGR	Karel Mulet	14963 Old Pointe Rd, Tampa, FL 33613	= Add
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ective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date:  If the date inserted in this block does not meet the applicable statutory filing requirement ament's effective date on the Department of State's records.	_ (optional) ays after filing.) Purs nts, this date will r	uant to 605,0207 not be listed as
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies filed.	er of: (b) The 90th	n day after the
ed July 12		