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(Re	equestor's Name)	
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SECRETARY OF STATE.

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COVER LETTER

TO: Registration Sec Division of Corp		v riame)	
SUBJECT:	EAN UN	IDER PRE	SSUAH, LLC
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Lando	Morales Name of Person	
	_C/car	Hirm/Company	essuah, LLC
	9346	Via Murano	Court
	E-mail address: (City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code	33905 2100 Amail. Com
For further information co	oncerning this matter, please ea	all:	V
Su Zani Name of	ne Morale	$S = \text{at} \left(\frac{231}{\text{Area Code}} \right) = \frac{822}{\text{Daytime T}}$	Celephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7 11, 32314	Street Address: Registration Section Division of Corporate Centre of Tall 2415 N. Monroe Stallahassee, FL 3	Orations Hahassee Street, Suite 810 955
Depa o F	a rtment State		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Clean Under Pressure of FLORIDA LLC
(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 Liabseller L22002	<u>87546</u> 24 <u>₹6</u> 8
A. If amending name, enter the new name of the	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)	110:11
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	9346 Via Murano Court Fort Myers, FL 33905
B. If amending the registered agent and/or registered office address h	stered office address on our records, <u>enter the name of the new registered</u> nere:
Name of New Registered Agent: New Registered Office Address:	Landon Edward Morales 5041 City Street Unit 1716 Enter Florida street address Orlando Florida 32839 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

•••	uthorized Person(s) authorized to man- om our records:	age, enter the title, name, and address of each person being added
MGR = Man AMBR = Auth	ager horized Member	These names Linese names Were on the Original application. Type of Action
<u>Title</u>	<u>Name</u>	Address Original application. Type of Action
AMBR	Landon Edward Morales	5041 City Street XAdd Unit 1716 Orlando, FL 32839 DRemove
<u>M</u> GR	Suzanne Marie Morales	Gart G3H6 Via Murano XAdd Fort Mycrs, FL 33905 Remove
MGR	Francisco Morales Jr	Galla Muanopadd Fort Mycrs, FL 33905 Remove
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ecord specifies a delayed effective date, bis filed.	ut not an effective	e time, at 12:01 a.m	. on the carlier of: (b) The 90th day after the
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Filing Fee: \$25.00