L22000406795

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corpo	orations				
NAME OF CORPOR	RATION: Almanz BER: L22000L	ar Cleanin 106795	g and Detall	ing "LLC	-
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Zunilda	Solo Name of Contact Person	n		
	EUO Z	Firm/ Company			
	590 Sun	Warbler Wa	<u>~</u>		
	540 Sun Saint Clou) FL 347	71		
		City/ State and Zip Cod	e		
	Zunildaalba		amail.com	-	
For further information	n concerning this matter, pleas	se call:		2	
Zunlda	Soto	at (407		7:33	especially † † Stratus de
Name (on Contact Person			20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Enclosed is a check fo	r the following amount made	payable to the Florida Dep.	artment of State:		1
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	2023 JUN 20 PH 1: 16	
	ling Address Indment Section		Address Iment Section		

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810



May 26, 2023

ZUNILDA SOTO 540 SUN WARBLER WAY SAINT CLOUD, FL 34771

SUBJECT: ALMANZAR CLEAMING AND DETALLING "LLC"

Ref. Number: L22000406795

We have received your document for ALMANZAR CLEAMING AND DETALLING "LLC" and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

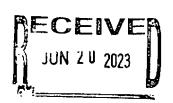
The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 323A00012177



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALMANZAR CLEAMING AND DETALLING "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 Liability Compan	y were filed on	and assigned
Florida document number L22000406795		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
ALMANZAR CLEANING AND DETAILING LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility 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)		- 100 - 100
		.: 23
Enter new mailing address, if applicable:		023
(Mailing address MAY BE A POST OFFICE BOX)		
		20
		P
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:		
N CN D. sistered Assess		1
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	ad bass
	Emer Prorida sireer	
	City	, Florida
New Registered Agent's Signature, if changing Registered Agen-	•	Lip Comb
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet	ree to act in this capacity e performance of my duti	es, 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 offic company has been notified in writing of this change.	e address, I hereby confir	rm that the limited liability
company and occur assignment in many of the 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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐Change
			□Add
			□ Remove
			□Change
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fective date, if other than n effective date is listed, the date ote: If the date inserted in the cument's effective date on the	must be specific and cannot be is block does not meet the ap	oplicable statutory fil	(option more than 90 days after filling requirements, this d	ing.) Pursuant to 605.0207 (
ecord specifies a delayed effe is filed.	ective date, but not an effecti	ve time, at 12:01 a.m	n. on the earlier of: (b)	The 90th day after the
June 15 ted	. 2023	·		
T) , , n	1 مر			
Zunild	a 5 000 Signature of a member or	authorized consessores	ve of a member	

Filing Fee: \$25.00