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COVER LETTER

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TO:

	stration Secsion of Cor		ns						
SUBJECT:	SL	IK	EXTERIO	R WA	SHING	LLC.			
sobsher.			Name of Lim						
The enclosed	Articles of	Amendr	ment and fee(s) are sub-	mitted for	r filing.				
Please return	all correspo	ndence	concerning this matter	to the fol	lowing:				
			JEREMY	H.	Sétleb				
				Na	me of Person				
			SLTN EX	TERT	OR WASH	IDWG	LL		
					m/Company				
			5012 SH	IERWO	OO BR				~ ~
					Address				•••
			NEW PORT R	T.CHEY	FL	3465	7.		1, -
					ite and Zip Code	<u> </u>			
		<u>. </u>	SLIK EYTE E-mail address: (1	K TO	for future annual	GMABL report notific	CoM	_	FH 4: 42
For further in	formation co	oncernii	ng this matter, please ca	all:				in:	1/2
JUR			Setuco	at	(727_)_	470-	4982		
	Name of	Person			Area Code	Daytime T	Telephone Nun	ıber	
Enclosed is a	check for th	e follov	ving amount:						
□ \$25.00 Fi	iling Fee		0.00 Filing Fee & Certificate of Status	Ct	5.00 Filing Fee ortified Copy Iditional copy is end		Certif Certif) Filing Fe ficate of St fied Copy final copy is c	atus &
	ing Address	_			Street A				
_	istration S ision of Co					ation Secti n of Corpo			
P.O.	. Box 632	7			The Ce	ntre of Tal	lahassee		
Tall	ahassee, F	L 323	14		2415 N	. Monroe S	Street, Suite	e 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

_	•	of the Limited Liability Compa	ny as it now appears on our reco	rds.)	·
		(A Florida Limited L	Liability Company)		
The Articles of C	Organization for this	Limited Liability Company	were filed on 10/31/22	2	and assigned
Plorida documer	nt number <u>L 22.00</u>	20466146			
Γhis amendment	t is submitted to ame	nd the following:			
A. If amending	g name, <u>enter the ne</u>	w name of the limited liab	ility company here:		
SLIK	PROPERTY	MANAGEMENT	LLC.		
he new name mus	t be distinguishable and o	ontain the words "Limited Liabil	ity Company," the designation "Ll	LC" or the abb	reviation "L.L.C."
Enter new prin	cipal offices address	s, if applicable:			
Principal office	e address MUST BE	A STREET ADDRESS)			
					•
					 .
Enter new mail	ling address, if appli	cable:			
Mailing addres	SS MAY BE A POST	OFFICE BOX)		<u> </u>	
				<u> </u>	
3. If amending gent and/or th	g the registered agen te new registered off	t and/or registered office a ice address here:	nddress on our records, <u>ent</u>	er the name	of the new register
<u>Name</u>	of New Registered A	gent:			
New R	Registered Office Add	ress:			
			Enter Florida street add	ress	
			,1	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			☐ Change
 			□Add
			□Remove
			□Change
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ffective date if other than the	date of filing: 7/20/	7_4	(ontional)	
ffective date, if other than the an effective date is listed, the date mus lote: If the date inserted in this bl	at be specific and cannol be prior	to date of filing or more that	n 90 days after filing.) Pursu pirements this date will n	ant to 605.02
ocument's effective date on the D				
record specifies a delayed effectiv is filed.	e date, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th	day after th
ated 7/29/24	, ·	<u> </u>		
	Signature of a member or outh			

Filing Fee: \$25.00