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COVER LETTER

TO: Registration So Division of Cor			
ONBOAR	D CLEANING LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ISBLER A HERNANDE	Z DAZA	
		Name of Person	
	ONBOARD CLEANING	LLC	
		FirmvCompany	
	5052 PONCE DE LEON	RD	
	<u> </u>	Address	
	KISSIMMEE FL 34746		
		City/State and Zip Code	
	ISBLERMAX@GMAIL.C		
For further information of	e-mail address: (concerning this matter, please c	to be used for future annual report no all:	uncation)
ISBLER A HRNANDE		407 987-0347	
Name o	of Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he following amount:		
✓ \$25.00 Filing Fee	S30,00 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 Addres		Street Address: Registration So	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONBOARD CLEANING LLC	
(Name of the Limited L. (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabil Florida document number L22000469751	lity Company were filed on 11/02/2022 and assigned and assigned
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the	e limited liability company here:
N/A	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	P. P. D. C. C.
(Principal Office address MOST BE A STREET A	
Contraction of the state of the	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO)	<u></u>
B. If amending the registered agent and/or regis agent and/or the new registered office address he	stered office address on our records, <u>enter the name of the new registered</u> ere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
-	, Florida

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>	<u>Name</u>	Address	Type of Action
VP	DAVID A FLORES	5052 PONCE DE LEON RD KISSIMMEE FL 34746	, □ Add
			_ ■ Remove
			_ Change
			_ □Add
			□Remove
			_ 🗆 Change
	<u> </u>		_□Add
			_ □Remove
			Change
			_ 🗆 🗖 Add
			_ □Remove
			_ □Change
			□Add
			□Remove-
			□Add
			_ □Remove
			(T) (Thomas or

	BUST REMOVING DAVID A FLORES FROM BUSINESS
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1.P.P. (*)	
f an eff <u>Note:</u>	ective date, if other than the date of filing:
recor d is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	May 22 2024.
	Signature of a member of a member of a member
	Signature of a member or authorized representative of a member
	ISBLER A HERNANDEZ DAZA

Typed or printed name of signee