## L 2 2 0 0 0 4 9 1 9 4 5

(Requestor's Name)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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Umilk	
Office Has Only	



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## **COVER LETTER**

TO:						
eun ir	C-4781					
SUBJE	Name of Limited Liability Company					
The encl	BJECT:    LD Dispatch LLC					
Please re	eturn all correspo	ndence concerning this matter	to the following:			
		Dianelis Gongora Montoy	a			
			Name of Person			
		LD Dispatch LLC				
			Firm/Company			
		5104 42nd PL N				
		Address				
		St Petersburg, FL 33709				
			City/State and Zip Code			
		E-mail address: (	to be used for future annual report notifi	ication)		
For furth	ner information c	oncerning this matter, please of	all:			
Dianelis Gongora Montoya		*				
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed	d is a check for th	ne following amount:				
<b>■ \$</b> 25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
				tion		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LD Dispatch LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11/17/2022	and assigned
Florida document number L22000491945		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab		
ED Cleaning Services LLC Promier Clack	anina LLC r	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5104 42nd PL N	
(Principal office address MUST BE A STREET ADDRESS)	St Petersburg, FL 33709	
Enter new mailing address, if applicable:	5104 42nd PL N	
(Mailing address MAY BE A POST OFFICE BOX)	St Petersburg, FL 33709	<del></del>
		20 <u>23</u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	name of the new register
agent and/or the new registered office address here.		4. 3 m 9
Name of New Registered Agent:		<del> :                                 </del>
New Registered Office Address:		
	Enter Florida street address	, · ·
	Florid	
	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>	<u>Name</u>	Address	Type of Action
		<del></del>	□Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
			□Add
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			☐ Change
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			☐ Change
			□ Add
			□Remove
			□ Change

	The purpose of this business is cleaning services
,	
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fect	tive date, if other than the date of filing: (optional) Sective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
ote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
cun	nent's effective date on the Department of State's records.
	rd 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
is t	led.
ated	November 12 2023
	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$
	Mal
	Signature of a member or arthorized representative of a member
	Dianelis Gongora Montoya

Filing Fee: \$25.00