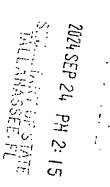
L23000008604

Office Use Only



700436972867

09/24/24--01016--017 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ocean Breeze Window Cleaning and Pressure Washing L.L.
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stephan McCann
Ocean Breeze Window Cleaning and Bressure Washing
2605 ASton Circle
Mel bourne, FL, 32940 City/State and Zip Code
Stephenm can 1720 Q cmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stephan MCCann at (321) 749-7500 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
✓ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

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

Street Address:

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

(Name of the Limited Liability Compar (A Florida Limited I.	ny as it now appears of itability Company)	Cleaning LLC
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000008604</u>	were filed on	$\frac{1412023}{2000}$ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabile Cean Breeze Window Cleaning Continued Labile and contain the words "Limited Labile".	1 0 00	- +
Enter new principal offices address, if applicable:	WA	
(Principal office address MUST BE A STREET ADDRESS)		S 26
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	4 SEP 24 PH 2: 15 CHLARASSEE, FL
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our reco	ords, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address:	For 17 21	a street address
	r,nier pionac	
 	City	Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		·
I hereby accept the appointment as registered agent and agre	e to act in this cap	pacity. 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

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>	Name	<u>Address</u>	Type of Action
			⊒Remove
	6 \		☐ Change
	N/A		□Add
			□Remove
	M\ / A		☐ ☐ Clunge
	M/A		
			□ Пестюче
	N /a		Change
	NA		□ Add
			□Remove
	01/4		□Change
	N/A		□ Add
			□Remove
	61 11		\toChange
	- IV/t		□Add
			□Remove
			□Change

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an ellec lote: I	tive date, if other than the date of filing: (optional) (tive 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 605.0207 (f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t nt's effective date on the Department of State's records.
record I is file	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 d.
ated _	Signature of a member or authorized representative of a member
	Stephan M Cann Typed or printed name of signee