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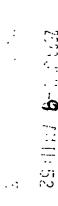
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COVER LETTER

TO: Registration So Division of Cor					
Firehouse I	Pressure Cleaning LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
	ondence concerning this matter	<u>-</u>			
	Nicole Teitelbaum				
		Name of Person			
	Firehouse Pressure Cleaning	ng LLC			
		Firm/Company			
	11311 NW 39th PI			, :	2023
	-	Address			c
	Sunrise, FL 33323			-	Ġ
	Nicole.tg@aol.com	City/State and Zip Code		•	11:50 2:11:20
		to be used for future annual report noti	fication)		J
For further information c	oncerning this matter, please c	all:		•	تعد
Nicole Teitelbaum		954 5529850 at ()			
Name o	f Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Fi Certifica Certified (additional	te of Sta Copy	atus &
Mailing Address Registration S	Section	Street Address: Registration Sec			
Division of C P.O. Box 632	-	Division of Cor The Centre of T	•		
エスクエルソハ ワジキ	1 1	riic Centic Of I	arianasse.		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Firehouse Pressure Cleaning 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 Company were filed on January 19th, 2023 _ and assigned Florida document number 1.23000036269 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) (.73 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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 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>	<u>Name</u>	Address	Type of Action
MGR	Eric Guerrero	4835 Tropicana Ave	
		Cooper City, FL 33330	□Remove
			☐ Change
			□Remove
			Change
			□Add
			☐Remove ☐Remove (J) ☐ Change
			☐Change
			□Add
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ctive date, if other than the date of effective date is listed, the date must be specie: If the date inserted in this block does ment's effective date on the Departme	ic and cannot be prior to date of not meet the applicable state	(option filling or more than 90 days after fil itory filling requirements, this d	ing.) Pursuant to 605.02
ord specifies a delayed effective date, b filed.	it not an effective time, at 12	2:01 a.m. on the earlier of: (b)	The 90th day after th
ed May 24th	. 2023		
1 X 2 A	of a member or authorized repr		

Filing Fee: \$25.00