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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Y. SCOTT JUN 17 2023

COVER LETTER

TO: Registration Division of C		•	ė.
SUBJECT:	Yellow Pad (Cleaning LLC	
	Name of Lin	nited Liability Company	
The analogue Amialas	of American and Garas and I	to the letter	
	of Amendment and fee(s) are sub	_	
Please return all corres	spondence concerning this matter	to the following:	
	Maurice	Hayes Name of Person	· · · · · · · · · · · · · · · · · · ·
		Firm/Company	
	520 N. E	Street. Apt 3	2023 HAY -
	Lake Worth,	FL 33460 City/State and Zip Code	
	Baynton Stron E-mail addresses	FL 33460 City/State and Zip Code 9 D Sm411 . Com to be used for future annual report notion	fication)
For further information	n concerning this matter, please c		
Maurice H	ayes	at (56/) 633 - Area Code Daytime	1094 e Telephone Number
		•	
Enclosed is a check for	r the following amount:		
V \$25.00 Filing Fee	□ \$30.00 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 Add		Street Address:	
Registration		Registration Sec	
P.O. Box 6.	Corporations 327	Division of Cor The Centre of T	
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2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

_ Mellow Pad Clean	ing, LLC	
(Name of the Limited (A	Liability Company as it now appears on our Florida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liab	· · ·	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the		
The new name must be distinguishable and contain the word	Cleaning Etc, LLC Is "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:	<u></u>	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		2027
		2023 HA
B. If amending the registered agent and/or regi agent and/or the new registered office address b		, enter the name of the new registered
		P III
Name of New Registered Agent:		
New Registered Office Address:		NE TO
	Enter Florida stre	et address
		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, 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
				□Add
				□Remove
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effective date is list	her than the date of ed, the date must be spe	citic and canno	ot be prior to dat	e of filing or more	than 90 days	after fili	ng.) Pur:	suant to 605.02
<u>e:</u> If the date thse ument's effective	erted in this block do- date on the Departm	es not meet ti ent of State's	ne applicable : records.	statutory filing r	equirements	, this da	ite will	not be listed
cord specifies a de s filed.	elayed effective date.	but not an ef	fective time, a	t 12:01 a.m. on	the earlier o	f: (b)	The 90t	th day after th
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	ril 25 Ma Signate	uril	Hauses	•				
-	Sienati	ure of a memb	er or authorized	representative of	a member	,		

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