L23000139022

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

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SUBJECT:		AN, STAY SAFE LLC				
SUBJECT	•	Name of Limi	ted Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please retur	n all correspo	ndence concerning this matter	to the following:			
		KEVIN ALEJANDRO AN	GULO QUINONES	•		
		-,	Name of Person			
	STAY CLEAN, STAY SAFE LLC					
	Firm Company					
	7941 W 2ND CT APT 101					
			Address			
		HIALEAH FL 33014		•		
			City/State and Zip Code			
		stayeleanstaysafe_305@out				
		E-mail address; (to be used for future annual report notific	ration)		
For further	intormation c	oncerning this matter, please co	all:	•		
Kevin A Angulo Quinones			305 5820252			
	Name o	(Person	Area Code Daytime	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)	\$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

_ and assigned
_ and assigned
viation "L.L.C."
of the new regi
023 V.E
2023 May 19
· 14
4 Zip Code

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.

11 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	Address	Type of Action
MGR	KEVIN ALEJANDRO ANGULO (7941 W 2ND CT APT 101 HIALEAH, FL 33014	
			□Remove
			□Change
MGR	KEVIN ANGULO A SR		□Add
			Remove
			□Change
			⊡Add
			□Remove
			□Change
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<u>cote:</u> If the c	e, if other than ate is listed, the date late inserted in thi ffective date on the	s block does not	t meet the appli	icable statutory f	or more than 90 da Hing requiremen	(optional) ys after filing.) I its, this date w	fursuant to 605,020 ill not be listed a:
record eneci	fies a delayed effe	otivo data, but n	at an affactiva	timo <i>at 17:</i> (11 o	on the small con-	and the Than	nod i s i
l is filed.	ies a delayed ene	enve date, but he	or an effective	mile, at 12.01 a.:	m. On the earne	or (b) The	эояп day after the
	May	1	. 2023	<u>) </u>	•		
ated		N 0.7 37					
ated		Mary Mary					
Dated		Signature of a	a member or autl	torized representa	live of a member		

Filing Fee: \$25.00



July 20, 2023

KEVIN LEJANDRO ANGULO QUINONES 7941 W. 2ND APT 101 HIALEAH, FL 33014

SUBJECT: STAY CLEAN, STAY SAFE LLC

Ref. Number: L23000139022

We have received your document for STAY CLEAN, STAY SAFE LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6353.

Alecia Rivers Regulatory Specialist III

Letter Number: 723A00016152

COT 1 3 2003