

L23000156150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

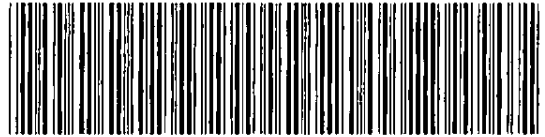
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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Clean Leaves LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Virginia Muñoz  
Name of Person

FL Pro Se LLC  
Firm/Company

7901 4<sup>th</sup> St N, Ste 11640  
Address

St Petersburg, FL 33702  
City/State and Zip Code

gministrator@flprose.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Virginia Muñoz at (954) 212-9926  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

Clean Leaves 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 3/28/23 and assigned  
Florida document number L23000156150

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FL Pro Se LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

7901 4th St. N, Ste. 11640  
St. Petersburg, FL 33702

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7901 4th St. N, Ste. 11640  
St Petersburg, FL 33702

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:

Northwest Registered Agent LLC

New Registered Office Address:

7901 4th St. N, Ste. 11640

Enter Florida street address

St Petersburg, Florida 33702

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.*

*Taylor N...*

If Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Address</u>	<u>Type of Action</u>
<u>AMBR</u>	<u>Alissa Humber</u>	<u>822 N. Tamarind Ave</u> <u>West Palm Beach, FL 33401</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
<u>AMBR</u>	<u>Virginia Muñoz</u>	<u>7901 4<sup>th</sup> St. N. Ste 11640</u> <u>St. Petersburg, FL 33702</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
<u>AMBR</u>	<u>Arthur T. Collette</u>	<u>7901 4<sup>th</sup> St. N. Ste 11640</u> <u>St. Petersburg, FL 33702</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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<u>          </u>	<u>                                  </u>	<u>                                  </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change



## Detail by Entity Name

Florida Limited Liability Company  
CLEAN LEAVES LLC

### Filing Information

Document Number	L23000156150
FEI/EIN Number	NONE
Date Filed	03/28/2023
Effective Date	03/28/2023
State	FL
Status	ACTIVE

### Principal Address

822 NORTH TAMARIND AVENUE  
WEST PALM BEACH, FL 33401

### Mailing Address

822 NORTH TAMARIND AVENUE  
WEST PALM BEACH, FL 33401

### Registered Agent Name & Address

HUMBER, ALISSA  
822 NORTH TAMARIND AVENUE  
WEST PALM BEACH, FL 33401

### Authorized Person(s) Detail

#### **Name & Address**

Title AMBR

HUMBER, ALISSA  
822 NORTH TAMARIND AVENUE  
WEST PALM BEACH, FL 33401

### Annual Reports

No Annual Reports Filed

### Document Images