L23000164041

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entry Name)				
(Document Number)				
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TO: Registration : Division of C			
	sure Washing LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Todd Sun		
		Name of Person	
	Suns Pressure Washing LL	.c	
	~	Firm/Company	
	3102 Pineview drive		
		Address	
	Holiday Floirda 34691		
		City/State and Zip Code	
	tjsun8@gmail.com	to be used for future annual report notification)	1823 FES
For further information	concerning this matter, please c		- မေ
Todd Sun		727 4336048 at ()	umber [25]
Name	of Person	Area Code Daytime Telephone N	fumber 1757 19
Enclosed is a check for	the following amount:		
≡ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy (additional copy is enclosed) Certified Copy	.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our reco a Limited Liability Company)	ord <u>s.</u>)		
The Articles of Organization for this Limited Liability C	Company were filed on 04/03/2023	:	and assi	gned
Florida document number L23000164041	<u>_</u> ·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company here:			
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "L	LC" or the abbrevia	ition "L.I	C."
Enter new principal offices address, if applicable:		<u> </u>	7023	
(Principal office address MUST BE A STREET ADDI	RESS)		7.51	<u></u>
•			<u></u>	
Enter new mailing address, if applicable:		<u> </u>	61110	
(Mailing address MAY BE A POST OFFICE BOX)		ma m		
B. If amending the registered agent and/or registered	d office address on our records, ent	er the name of	the new	registe
agent and/or the new registered office address here:	,			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street add	lress	_ ,	
		Florida		
			p 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 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>	<u>Address</u>	Type of Action
MGR	Todd Sun	3102 Pineview Drive Holiday Floirda 34691	■ Add
			□Remove
-			□ Change
			□Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 04/03/2023 _____ (optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated ____ 2023 Signature of a member or authorized representative of a member

Typed or printed name of signee

Todd Sun