L23000179335

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COVER LETTER

	Registration Sed Division of Corp			
SUB IEC		IMITED ENTERPRISES LLC		
SUBJEC	1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		Arkeisha Reese		
			Name of Person	
		A&K UNLIMITED ENTE	ERPRISES LLC	
			Firm/Company	
		8891 Brighton Lane Ste 10	08 Bonita Executive Center,	200
			Address	
		Bonita Springs, FL 34135		141
			City/State and Zip Code	
		threesixtydegreeseleaning@		
For furth	er information co	E-mail address: (oncerning this matter, please c	to be used for future annual report notificall:	cation)
Arkeisha	Reese		786 346-8910	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	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			Street Address: Registration Sect	ion
	Division of C		Division of Corp	
	P.O. Box 632		The Centre of Ta	
	Tallahassee, I	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A&K UNLIMITED ENTERPRISES 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 C	Company were filed on 04/11/2023	and assigned
Florida document number L23000179335	• •	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited 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 ADDR	RESS)	
		202
Enter new mailing address, if applicable:		;
(Mailing address MAY BE A POST OFFICE BOX)		——————————————————————————————————————
B. If amending the registered agent and/or registered	d office address on our records, <u>e</u>	
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street a	ddress
		_, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered	d Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered as being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of my dutie gent as provided for in Chapter (ed office address, I hereby confir	es, and I am familiar with and 605, F.S. Or, if this document is
	If Changing Registered Agent, Signat	ture 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	Edward Smith	8891 Brighton Lane Ste 108 Bonita Executive Center	≅Add
		Bonita Springs, FL 34135	□Remove
			□ Change
			□Add
			□Remove
			☐Change
			—⊕Add
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

	ng any other information, enter change(s) here: (Attach additional sheets, if necess	
		
		<u></u>
		
		
-	* * * * * * * * * * * * * * * * * * * *	
	 	<u>-</u>
-		
		
		
Effective	date, if other than the date of filing: (option	al)
f an effecti	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fi	ling.) Pursuant to 605.0207
	ne date inserted in this block does not meet the applicable statutory filing requirements, this can be seffective date on the Department of State's records.	iate will not be listed as
	·	
record sr	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
d is filed.		
		7.5 7.3 7.3
Dated	95/02 2023	;;; ;!
		បា
	Signature of a member or authorized representative of a member	=:
	Signature of a member or authorized representative of a member Arkeisha Reese	

Filing Fee: \$25.00