L23000185910

(₭€	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Cr 8/8/2023

COVER LETTER

10:	Division of Cor		14	
CUD IF	Brevard Cl	caning LLC		
SUBJE	CT:		nited Liability Company	··
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Sofia Vasquez		
			Name of Person	
		ZenBusiness INC		
			Firm/Company	.
		336 E. College Ave Suite	301	
			Address	
		Tallahassee, FL 32301		
			City/State and Zip Code	-
		fulfillment@zenbusiness.co E-mail address: (om to be used for future annual report not	ification)
For furt	her information c	oncerning this matter, please c		
c/o Zei	ıBusiness INC		844 493-6249 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclose	d 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 Addres Registration S		<u>Street Address:</u> Registration Se	ection
	Division of C		Division of Co.	and the same

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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



2023 JUN 26 PM 5: 53 Brevard Cleaning 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 $\frac{(14/14/2023)}{(14/14/2023)}$ ____ and assigned Florida document number ± 23000185910 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address . Florida

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.

City

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	Monica A Yankton	419 Montecito Dr	Add
		Satellite Beach, FL 32937	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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(If an effective date is listed, the date many of the state of the sta	ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 block does not meet the applicable statutory filing requirements, this date will not be listed a Department of State's records.)7 (3)(is the
ne record specifies a delayed effect ord is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	e e
Dated	. 2023	
/s/ Justin Yankton		
	Signature of a member or authorized representative of a member	
Justin Yankton, Mem	per	
	Typed or printed name of signee	

Filing Fee: \$25.00