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(Cit	y/State/Zip/Phone	9. #T)
γο	y/ O(a(a/2,p)) // (i)	<i></i> ,
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer.	
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Office Use Only



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09/09/24--01011--013 **25.00

SECONDAINT STATE

2024 SEP -9 PK 12: 4°

Suction Caddy, LLC EIN: 92-3924455 FL doc number: L23000 715718

Manager member: Tomas Martin
Phone number: (561) 374-4817

Address: 2410 Nw 29th Rd
1300g Raten FL 33431

COVER LETTER

TO: Registration S Division of Co			
OLD LEGT	Surtium Caddy	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
	Suction Coddy LLC Name of Limited Liability Company les of Amendment and feets) are submitted for filing. Tomas Martin Name of Person Suction Slow Firm/Company 2410 NW 29th Rd Address Bera Ration FL 33431 City/State and Zip Code Tomas Suction Stow. Com E-mail address: (to be used for future annual report notification) ation concerning this matter, please call: Martin Same of Person at 561 Area Code 374-4817 Daytime Telephone Number k for the following amount: Fee S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)		
The enclosed Articles of	'Amendment and fee(s) are sub	mitted for filing.	
rease return an corresp.	onactice concerning and mana-		
	To	nas Martin	
		Name of Person	
	-	Firm/Company	
	2	410 NW 29th Ro	
		Address	
	Bec	a Ruton FL 33	3431
	_	City/State and Zip Code	
	Toma suc	tion Stow. Com	
	E-mail address: (to be used for future annual report not	(Heation)
For further information	concerning this matter, please concerning	all:	
Tomas V	Martin	a1(561, 374	-4817
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
		Sa 4 d.d	
Mailing Addro Registration		Street Address: Registration Se	ection
_	Corporations	Division of Co	rporations
P.O. Box 63		The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Suction Caddy					
(<u>Name of the Limited Liability Compai</u> (A Florida Limited Li	v as it now appears on our ability Company)	Division of			
The Articles of Organization for this Limited Liability Company version of the Articles of Organization for the Limited Liability Company version of the Limited Liability Company version of the Liab	were filed on Sun biz	Corporations and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil					
Suction Stow L The new name must be distinguishable and contain the words "Limited Liability"	-L.C				
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation				
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	SER				
		1 · · · ·			
		ζη·			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	N/N	<u> </u>			
		m -			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records,	enter the name of the new registered			
Name of New Registered Agent:					
Name Ramintared Office Address:					
New Registered Office Address:	Enter Florida stree	t address			
	, Florida				
	City	Zip Code			
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my du provided for in Chapter	ties, and I am familiar with and • 605, F.S. Or, if this document is			

N/A

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>	Name	Address	Type of Action
			DAdd
			□Remove
			□ Change
			□Add
			Remove
			Change
			□Add
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an effective lote: If th	late, if other than the e date is listed, the date mus e date inserted in this blo s effective date on the Do	t be specific and o ock does not me	cannot be prior to eet the applicabl	date of filing o	or more tha iling requ	n 90 days	optional) after filing.) s, this date v	Pursuant to vill not be	605.0207 listed as
record spe Lis filed.	ecifies a delayed effective							90th day a	ifter the
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	7/1/2000	<i>.</i>		" W	1/ /				
	9/1/2024	Signature of a m	nember of anthoriz	ed representa	er fu	ember		· · · · · · · · · · · · · · · · · · ·	

Filing Fee: \$25.00