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COVER LETTER

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TO:	Registration Section	

P.O. Box 6327

Tallahassee. FL 32314

Division of Corporations

PATRIOT CLEANING SERVICES, LLC

SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	KRISTY A. LOWRY				
		Name of Person			
PATRIOT CLEANING SERVICES, LLC					
		Firm/Company			
	2216 EAGLE BLUFF DR	IV E			
		Address		757	
	VALRICO, FLORIDA 33:	596		13.14 22.14 -	
		City/State and Zin Code			
	KRANNLOWRY@GMAII	COM	3.5		*
	E-mail address: (to be used for future annual report notification)	<u> </u>		:
For further information c	oncerning this matter, please ca	all:	긷된	AH 7: 50	**
KRISTY A. LOWRY		248 506-6805	1.1	J	
Name o	f Person	at ()	lumber		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Cer	0.00 Filing Feo rtificate of Sta rtified Copy ditional copy is e	atus &	
Mailing Address Registration	Section	Street Address: Registration Section			
Division of C	Corporations	Division of Corporations			

The Centre of Tallahassee

Tallahassee, FL 3230

2415 N. Monroe Street. Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PATRIOT CLEANING SERVICES, LLC	
Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fi	iled on 06/09/2023 and assigned
lorida document number L23000279579	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability co	mpany here:
BAY BREEZE IV'S, LLC	
he new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	225
nter new mailing address, if applicable:	\$3 - · · ·
Mailing address MAY BE A POST OFFICE BOX)	MIT A 1::
Author Market Marie Box	——————————————————————————————————————
	
If amending the registered agent and/or registered office address gent and/or the new registered office address here:	on our records, enter the name of the new regi
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
Cin	

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 amending Authoriz d 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
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ctive date, if other than the effective date is listed, the date mus	t be specific and cannot be prior t	o date of filing or mor	c than 90 days after fili	ng.) Pu	ursuant t	o 605.02
e: If the date inserted in this blument's effective date on the Deliment.	ock does not meet the applica	ble statutory filing	requirements, this da	ite wi	II not be	e listed :
ord specifies a delayed effective	e date, but not an effective tir	ne, at 12:01 a.m. on	the earlier of: (b)	The 9	Oth day	after th
C1 1						
filed.						
filed.	2024					
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filed.	Signature of a member or author					