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(((H23000254219 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: AVA FINANCIAL CONSULTANTS INC

Account Number: I20170000094 Phone : (954)842-1979 Fax Number : (954)905-4315

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

順後AMND/RESTATE/CORRECT OR M/MG RESIGN® ່ວ່າເປັ້ນ & S PRESSURE WASHING & PAINTING LLC

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COVER LETTER

	gistration Section H23000 254219 3
SUBJECT: The enclose Please retur	NJ & S PRESSURE WASHING & PAINTING LLC
SUBJECT	Name of Limited Liability Company
	S PRESSURE WASHING & PAINTING LLC Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing. wrespondence concerning this matter to the following: GANESH SANTU Name of Person NJ & S PRESSURE WASHING & PAINTING LLC Firm/Company 3564 NW 39TH ST Address LAUDERDALE LAKES, FL 33309 City/State and Zip Code j.spressurewashiers@gmail.com E-mail address: (to be used for future annual report notification)
The enclose	d Articles of Amendment and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	GANESH SANTU
	Name of Person
	NJ & S PRESSURE WASHING & PAINTING LLC
• .	Firm/Company
	3564 NW 39TH ST
	Address
	LAUDERDALE LAKES, FL 33309
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
GANESH	Ditt. 10
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Mailing Address; Registration Section Division of Corporations P.O: Box 6327 Tallahassee, FL 32314

Certificate of Status

Certified Copy

(additional copy is enclosed)

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassec, FL 32303

Certificate of Status &

Certified Copy . (additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF H230002542193

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NJ & S PRESSURE WASHING & PAINTING LLC

The Articles of Organization for this Limited L	iability Company	y were filed on <u>07/</u>	12/2023	and assigned
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iorida decidient realiser		•	• • • • • • • • • • • • • • • • • • • •	• • •
his amendment is submitted to amend the following	lowing:	` ,	·	
. If amending name, enter the new name o	fithe limited lial	kility company be	Fe'	
•	He mined ha	Company is	-2 ·	
√/A		7 Comment Related	ai maria a MY I OTI a a Abar	hhaviation "I T C "
he new name must be distinguishable and contain the	words "Limited Liab		esignation "LLC" of the s	obrevianou L.L.C.
Enter new principal offices address, if appli	cable:	N/A		
Principal office address MUST BE A STREE		· · · · · · · · · · · · · · · · · · ·	·	
77700000	·			
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		N/A		
Inter new mailing address, if applicable:		17/8		
Mailing address MAY BE A POST OFFICE	BOX			<u>,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
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3. If amending the registered agent and/or		address on our re	cords, enter the na	ne of the new regis
gent and/or the new registered office addr	ess here:	• •	·	• •
	. /-	·.	•	•
Name of New Registered Agent:	N/A		<u> </u>	<u> </u>
New Profession of Office Addison	N/A	•	•	~_ `~
New Registered Office Address:		Enter Flor	ida street address	<u> </u>
,				
		City	, Florida _	7:- 5:- 6:-
Now Besistaned Assemble Commence of the comment	managarah a a	•		Zip Code
New Registered Agent's Signature, if changing	Kegistered Agent	<u>t:</u> .	,	· · · · · · · · · · · · · · · · · · ·

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 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

H23000 2542193

415

Title	<u>Name</u>	Address	Type of Action
AMBR	NIRESH SANTU	3630 NW 39TH ST	□Add
		LAUDERDALE LAKES, FL 33309	□Remove
<i>:</i>		····	= Change
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Filing Fee: \$25:00