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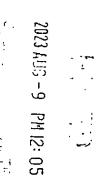
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: P&M Pressure Washing LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Wendy Johnson Name of Person	
P&M Pressure Washing LLC Firm/Company	
404 ROSEMATIE AVENUE Address	
Brandon FLorida 33511 City/State and Zip Code	
PNMPRESSURE WAShing @ 6 mail. Com E-mail address: (to be used for future agricual report notification)	
For further information concerning this matter, please call:	
Wendy Johnson at (224) 315 - 0888 Name of Person Area Code Daytime Telephone Number	-
Enclosed is a check for the following amount:	
□ \$25,00 Filing Fee □ \$30,00 Filing Fee & □ \$55,00 Filing Fee & □ \$60,00 Filing Fee & □	tatus &

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

Street Address:

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

PLM Pressu	re Washin	19 LLC		-9 PM 12: 05
(Name of the Lim	ited Liability Company (A Florida Limited Liab	as it now appears on ou bility Company)	r records.)	
The Articles of Organization for this Limited		- /	TALL	5 - 2. FL
The Articles of Organization for this Limited	Liability Company we	ere filed on $\frac{7}{13}$	5/2023	_ and assigned
Florida document number <u>L 23 000332</u>	<u>.670</u>			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liabilit	y company here:		·
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designati	on "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if appli	icable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
		· <u>-</u>		
Enter new mailing address, if applicable:	_			
(Mailing address MAY BE A POST OFFICE	<u> </u>		<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addr	_	dress on our records	, enter the name	of the new registere
Name of New Registered Agent:	Wendy	Johnson		
New Registered Office Address:	Leole Ro	SEMATIE F Enter Florida stre	ven ve et address	
	Brandon)	, Florida _ <u>3</u>	3511
		City		Zip Code

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 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Wendy Johnson	606 Rosemane Avenue	XAdd
		Brandon, Florida 33511	Remove
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faneffect <mark>Note:</mark> If	e date, if other than the date of filing:
record s d is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the l.
Dated	08/07, 2023
	Signature of a member or authorized representative of a member