

L23000462910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

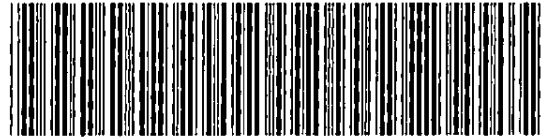
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

Handwritten signature

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Infinite Views Window Cleaning, 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:

Tre' Wilson

Name of Person

Infinite Views Window Cleaning, LLC

Firm/Company

8265 SE 162nd St

Address

Summertield, FL 34491

City/State and Zip Code

tre.wilson190@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tre Wilson

352

561-1307

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

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2023 NOV 16 AM 11:48
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Infinite Views Window 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 October 6, 2023 and assigned
Florida document number L23000462910.

This amendment is submitted to amend the following:

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 "L.L.C."~~

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

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CLERK OF CIRCUIT COURT
HALL COUNTY, FLORIDA

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~~

~~City~~

~~Florida~~

~~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

amending Authorized Person(s) authorized to manage. enter the title, name, and address of each person being added
removed from our records:

GR = Manager
AMBR = Authorized Member

<u>title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
gr	Tre' D. Wilson	8265 SE 162nd St	<input type="checkbox"/> Add
		Summertfield, FL 3491	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
R	David Atkinson, III	4047 Picciola Rd	<input type="checkbox"/> Add
		Fruitland Park, FL 34731	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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CLERK OF DISTRICT COURT
TALLAHASSEE, FL

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2023 NOV 16 AM 11:48
FBI
ALLAHABAD, INDIA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Typed or printed name of signee