

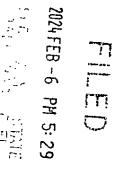
(Re	equestor's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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## **COVER LETTER**

TO:

Registration Section

TLC Ext SUBJECT:	erior Cleaning LLC
	Name of Limited Liability Company
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
	Rohan Gilbert
	Name of Person
	Firm/Company
	1401 NE 43rd LN
	Address
	Cape Coral, FL 33909
	City/State and Zip Code
	tlcexteriorcleaningllc@gmail.com
	É-mail address: (to be used for future annual report notification)
For further information	n concerning this matter, please call:
Rohan Gilbert	239 878-4557 at ()
<del> </del>	e of Person at ()  Area Code Daytime Telephone Number

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TLCEXTERIORCLEANING, 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 1/23/2024 and assigned Florida document number L24000044140 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TLC EXTERIOR CLEANING, LLC 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) B. 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 \_, Florida \_\_\_

## 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.

City

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
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Note:	If the date inserted	d in this block does no on the Department	ot meet the applicab	le statutory filing requ	irements, this date will no	t be listed as th
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Dated	January 30th		, 2024			
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Filing Fee: \$25.00

Typed or printed name of signce