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## **COVER LETTER**

	egistration Solvision of Col			
SUBJECT	G&B SOL	AR CLEANING SOULTIONS	S, LLC	
SUBJECT	•	Name of Lin	nited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		JEFFERY J GAINEY		
			Name of Person	<del></del>
		G&B SOLAR CLEANING	g so <b>ul</b> tions, llc	
			Firm/Company	
		5765 J V WOOLLEY RD		
			Address	
		CRESTVIEW, FL 32539		
			City/State and Zip Code	<del></del>
		REDGAINEY@GMAIL.C	ОМ	
		E-mail address: (	to be used for future annual report not	ification)
For further	information c	oncerning this matter, please c	all;	
JEFFERY.	J GAINEY		850 826-7143	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	e following amount:		
■ \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Re Di	ailing Address gistration S vision of C	Section orporations	Street Address: Registration Se Division of Cor	
	O. Box 632 Ilahassee, F		The Centre of T	
1 0	manassee, r	た つたつ 1ユ	2410 IN. Monro	e Street, Suite 810

Tallahassee, FL 32303

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

G&B SOLAR CLEANING SOULTIONS, LLC

(A Florida Limit	npany as it now appears on our ed Liability Company)	records.)
The Articles of Organization for this Limited Liability Compa	any were filed on 02/20/2024	and assigned
Florida document number L24000088462		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
G&B SOLAR CLEANING SOLUTIONS, LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation	n "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:		, <u></u>
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amonding the registered gard and/or well-to-d-60	11	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records,	enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
Negistered Office Address.	Enter Florida stree	t address
		, Florida
<del></del>	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent and a	gree to act in this capacit	v. I further agree to comply with th

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Add
			□Remove
		<del></del>	□Change
		<del>-</del>	□Add
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fective date, if other than the date n effective date is listed, the date must be ote: If the date inserted in this block cument's effective date on the Depart	does not meet the app	licable statitory filing	(optiona ore than 90 days after filing greowitements, this dat	l) g.) Pursuant to 605.0207 e will not be listed as
ecord specifies a delayed effective da is filed.	te, but not an effective	e time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
ted	, 2024	·		
ted $\frac{02/26}{\chi}$ LETER CALLY Sign				

Filing Fee: \$25.00