

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000331985 3)))



H240003319853ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190

Phone

: (844)449-3624

Fax Number

: (512)597-0678

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

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HYDROCLEAN DRIVEWAYS & SIDEWALKS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ompany as it now ap- nited Liability Compar	<u>nears on our record</u> ny)	<u>7.)</u>		
ipany were filed on	03/18/2024		and ass	igned
Hiability company	<u>v here</u> :			
Liability Company." (he designation "LLC"	" or the abbrev	iation "L	1C."
(S)		<u> </u>		
		1,2.	·=""}	11.5
		5.3	:	
		% (%)		
		17/20 17/20 17/20		
	<u></u>	<u> </u>	ف	
		<u> </u>	-5 -	
red office address <u>s here</u> :	on our records	s, <u>enter the</u>	: name	of the ne
Enter	Floridastreetaddress	r		
	EL	orida		
	. P 10			
	Liability company." (SS) ed office address shere:	Hisbility company here: Liability Company in the designation "LLC" (S) red office address on our record: s here:	Liability company here: Liability Company." the designation "LLC" or the abbrev (S) COCUMENT OF THE COCUMEN	I liability company here: Liability Company." the designation "L.C" or the abbreviation "L.C" of the abbreviation "L.C" o

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 = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			□ Remove
			□ Change
***************************************	L ALWANIA		
			□ Remove
			☐ Change
			□ Remove
			□ Change
			DAdd
			SO Deficiency
			A Change
			□ Add
			Remove
			Change
			Add
			Remove

□ Change

. 16 15 .	Page: 4 of 4	2024-10-02 07:29:05 UTC÷14	18506176383	From: ZenBusines
. II amendia	g any other informat	ion, enter change(s) here: (Attach add	(nnonai sneers, y necessary.)	
				
				·
				neuron and a more fine the definition which
*****				***************************************
				
			<u></u>	.
~ ~~	······································			
***				> 131
		· · · · · · · · · · · · · · · · · · ·	٠٠٠. حَت	<u> </u>
			r	
Note: If the	date inserted in this blo	date of filing: be specific and cannot be prior to date of filing o bek does not meet the applicable statutory t partment of State's records	(optional) r more than 90 days after filing.) Pu iling requirements, this date w	u suant to 605,0207 (3)(b) iH not be listed as the
	specifies a delayed In day after the reco	effective date, but not an effective ord is filed.	ve time, at 12:01 a.m. or	the earlier of:
Dated Septe	mber 28	, 2024		
iş.	/ Jennifer Torres			
_		Signature of a member or authorized representa	tive of a member	
_	ennifer Torres	Typed or printed name of signe		

To:

Page 3 of 3

Filing Fee: \$25.00