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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	Bradley and Ser	15 Cleaning Services L.L.C.	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u> </u>	shua Bradley Name of Person	
	Bradley a	nd Sons Cleaning Services L	L.C
	11021	Notney Orive	<u>.</u>
	Palm Beac	Lity/State and Zip Code Y 133 E Yahoo. Com to be used for future annual report notification)	202
	jeshva bradle	y 123 e yahoo.com	ALL CRE
For further information c	E-mail address: (concerning this matter, please c		326 F
Joshua Name o	Bradley of Person	at (609) 435 - 75 65 Area Code Daytime Teleph	2024 AUG 26 PH 12: 09 SECRETARY OF STATE TALLADACS OF Figure
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		Street Address: Registration Section	
Division of C P.O. Box 632	-	Division of Corporation The Centre of Tallaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bradley and Sons	Cleaning Service		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 14000344 331</u> .	were filed on	5 30 2024	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the design	ation "LLC" or the dbbr	evincon "L.L.C."
Enter new principal offices address, if applicable:	NA		
(Principal office address MUST BE A STREET ADDRESS)		134 229 7,79	26
Enter new mailing address, if applicable:	NA	STATE	PH 12: 09
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our recor	ds, <u>enter the name</u>	of the new register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida st		
	r.mer r tortaa si	reet aauress	
	City	Florida	Zip Code
Now Registered Apent's Signature if changing Registered Apent-	•		inp Conc

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
· 			
			□Remove
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			□Remove
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. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date, if other than the date of filing:	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at rd is filed.	ter the
Dated 7/3/3024 July 3rd 2024	
Signature of a member or authorized representative of a member	
To Shoa Bradley Typed or printed name of signce	