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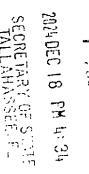
(Requestor's Name)
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(Document Number)
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COVER LETTER

TO:	Registration Sec Division of Corp								
SUBJE	Rapido Clea								
SOBJE	CT:	Name of Lim	ited Liability Company		d to 7 d 1				
The enc	losed Articles of A	amendment and fee(s) are sub	mitted for filing.						
Please re	eturn all correspon	dence concerning this matter	to the following:						
		Michael D. Petri							
			Name of Person	<u> </u>					
		Rapido Clean LLC							
			Firm/Company	·····					
		2418 Winnipeg Dr							
		Address							
		Lakeland, FL 33805							
			City/State and Zip Code						
		michaeltx99@gmail.com							
		E-mail address: (to be used for future annual	report notification)					
For furth	ner information co	ncerning this matter, please ca	all:						
Michael D. Petri			305 98	8-9661					
	Name of	Person	Area Code	Daytime Teleph	tone Number				
Enclose	d is a check for the	following amount:							
		·	□ 655 00 PT . P	ο	3 600 00 UHaa Paa				
■ \$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee of Certified Copy (additional copy is enc		1 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	Mailing Address	ł.	Street A	ddress:					

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

1074 DEC 18 PH 4:34

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rapido Clean 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 tiled on $_^{August\ 05,\ 2024}$ and assigned This amendment is submitted to amend the following: A. 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 "LLC." 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 City 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 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
AMBR	Rodrigo Cordero	2418 Winnipeg Dr. Lakeland, FL 33805	= Add
		·	□Remove
			Change
			□Add
			Remove
			Change
			□ Add
			□Remove
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			□Add
			□Remove
			□Change
	,		□Add
			SECRETATY OF DATE OF ASSETS
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ffective date, i an effective date is ote: If the date ocument's effect	s listed, the date m inserted in this l	iiist be specific a block does not	ind cannot be p t meet the app	rior to date of plicable statu	filing or more story filing re	than 90 days at	this date will	not be lis	sted as
record specifies is filed.	a delayed effect	ive date, but n	ot an effectiv	e time, at 12	2:01 a.m. on	the earlier of:	ECROTARY (TAIL AHAS	2024 Digit 18	ered 19 ler the
ated <u>Dec</u>	rember	14	. 2021	1 .	Q /		7 05 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		51 -4 **
		Signature Nr.	a member or a	uthorized repr	reschiative w	a member		<u> </u>	

Filing Fee: \$25.00