L24000426614

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COVER LETTER

TO: Registration Solution of Col			
	O RGM PRESSURE WASHIN	oric .	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	RICARDO GONZALEZ	MOREJON	
	· · ·	Name of Person	
		Firm/Company	
	11521 IVY FLOWER LO		
		Address	
	RIVERVIEW, FLORIDA		
	1 240 1	City/State and Zip Code) ;
	gonzalezr536@yahoo.com	to be used for future annual report notif	ication)
For further information of	oncerning this matter, please c	•	readon)
RICARDO GONZALEZ	MOREJON	813 7041101 at ()	: :
Name o	t Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	*:
Registration Section Division of Corporations		Registration Sec Division of Corp	
P.O. Box 632		The Centre of Ta	
Tallahassee, I	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL TURBO RGM PRESSURE WASHING LLC	•	
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 10/02/2024	and assigned
Florida document number L24000426614		
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 "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u> </u>	
		<u> </u>
Enter new mailing address, if applicable:		.9
Mailing address MAY BE A POST OFFICE BOX)		ري ــــــ
-		
		7.0 4.0
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, <u>enter the</u>	name of the new regist
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	City	Zip Code

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	RICARDO GONZALEZ MOREJO	11521 IVY FLOWER LOOP , RIVERVIEW ,FL.335	57: ≣Add
			□Remove
			_ □Change
			_ 🗆 Add
			_ □Renюve
			_ □Change
			_ □Add
			∷ □Remove
			_ □Change
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			□Change

FEIN-33-1470730	
	
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tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filing. If the date inserted in this block does not meet the applicable statutory	g or more than 90 days after filing.) Pursuant to 605.0.
ment's effective date on the Department of State's records.	g requirements, this date will not be inseed
ord specifies a delayed effective date, but not an effective time, at 12:01 a filed.	a.m. on the earlier of: (b) The 90th day after the
1_10-23-24	
(2)	
HIC SALES	tative of a member

Typed or printed name of signee