P04000103749

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	EAUNDRY SOLUTIO	NS INC			
DOCUMENT NUMB	ER: P04000103749					
	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	oondence concerning this ma	tter to the following:				
	JOSEPH FALUADE					
-		Name of Contact Persor				
	LOGICAL LINEN & LAUNDRY SOLUTIONS INC					
-	Firm/ Company					
	2111 SW 60th WAY					
-		Address				
	MIRAMAR FL 33023					
-		City/ State and Zip Code				
	logicallinen@aol.com					
-	E-mail address: (to be us	ed for future annual report	notification)			
For further information JOSEPH FALUADE	concerning this matter, pleas	se call:at (
Name o	f Contact Person	at (Area Coo	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



	Articles of Amo	endment		ILED 23 AH 9:0
	to Articles of Incor	poration	For	and the same and the same
	of	F	<i>f</i> -	11 ED
OGICAL LINEN & LAUNDRY SOLUTIC	ONS INC		2001	
(Name of Co	orporation as currently t	iled with the Florida D	ept. of State	23 Ali 0 -
04000103749			8.80, -	"" 9: 0
	(Document Number of C	Corporation (if known)	TALLE	3237677
ursuant to the provisions of section 607.1006 Articles of Incorporation:	5, Florida Statutes, this <i>Fl</i>	orida Profit Corporatio	n adopts the following	g amendment(s)
If amending name, enter the new name	of the corporation:			
7/A				The new
ume must be distinguishable and contain the Inc.," or Co.," or the designation "Corp. chartered," "professional association," or t	" "Inc," or "Co". A p	npany," or "incorporate professional corporation N/A	ed or the abbreviation In name must contain	n Corp., n the word
Enter new principal office address, if ap Principal office address MUST BE A STRE		N/A		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		N/A		
. If amending the registered agent and/or	registered office addres	s in Florida, enter the	name of the	
new registered agent and/or the new reg	gistered office address:			
Name of New Registered Agent	\			_
	(Florida stree	address)	<u></u>	•
Van Basistana (Office Udana N/i	١		Florido	
<u>New Registerea Office Address</u> :	10	ity)	, riorida (Zip (Tode)
New Registered Office Address: N/i		ity)	, Florida(Zip (Tode)
New Registered Agent's Signature, if chang hereby accept the appointment as registered		h and accept the obligat	ions of the position.	
Joseph	Lahrade			
		istered Agent, if changir		-

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	<u>John Doe</u>			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
I) Change	Р	CHRISTINA A ADERINOKUN	2111 SW 60th WAY		
Add			MIRAMAR FL 33023		
X Remove 2) Change	þ	JOSEPH FALUADE	2111 SW 60th WAY		
$\frac{X}{X}$ Add			MIRAMAR FL 33023		
Remove Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

4 canapassessing	ding additional Arti sheets, if necessary).	cies, enter changet (Be specific)	s) nere.		
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If an amendment	provides for an exch	ange, reclassificati	on, or cancellation o	f issued shares,	
provisions for im	plementing the ame	ndment if not cont	ained in the amendn	nent itself:	
lifune analia.	able, indicate N/A)				
(y not applica					

	09/15/2023	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	0/15/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the ame sufficient for approval.	ndment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by N/A	"	
•	(voting group)	
09/15/20 Dated	23	
Signature	respt Ficheada	
(By a selec	director, president or other officer – if directors or officers have n ted, by an incorporator – if in the hands of a receiver, trustee, or of inted fiduciary by that fiduciary)	
	JOSEPH FALUADE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	



January 5, 2024

JOSEPH FALUADE 2111 SW 60TH WAY MIRAMAR, FL 33023

SUBJECT: LOGICAL LINEN & LAUNDRY SOLUTIONS INC

Ref. Number: P04000103749

We have received your document for LOGICAL LINEN & LAUNDRY SOLUTIONS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 424A00000263

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