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## **COVER LETTER**

•			
SUBJECT: 5	AND A PROP	PERTY SOLUTION ted Liability Company	NS LLC
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	SEAN	STIMATZ Name of Person	
	SAND A	Onoisenty Socution Firm/Company	vs LLC
	1205 3	SAGIAMURK DR. Address	
	SEFEN	ER FL, 33584 City/State and Zip Code	<u>′</u>
	55TIMAT E-mail address: (to	Z@ /AHOO . Com o be used for future annual report not	ification)
For further information cor	ncerning this matter, please ca	JI:	
<i>ろ</i> ど <b>タ</b> ル <b>5</b> 7 Name of <b>I</b>	Person	at (8/3 ) 707 - Area Code Daytin	3479 ne Telephone Number
Enclosed is a check for the	following amount:		,
□ \$25.00 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)

MAILING ADDRESS:

TO:

**Registration Section** Division of Corporations

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

TO Fig.
ARTICLES OF ORGANIZATION '/LFD
$OF \qquad \qquad 2017_{NO\nu} = U$
ARTICLES OF ORGANIZATION OF  2017 NOV 27 PM 6 18  SECRETARY OF STATE (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 filed on $\frac{05/27/2014}{2014}$ and assigned
Florida document number <u>L1400084339</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
STIMATZ CONSTRUCTION LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
he 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)
3. 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

## 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.

City

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: FILED 2017 NOV 27 PM \$1/8 MGR = Manager AMBR = Authorized Member **Title** Name **Address Type of Action** \_□ Add ☐ Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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(If an effective date is	s listed, the date must be specific	c and cannot be prior to	date of filing or more than	190 days after filing.) Put	
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document's effect	ive date on the Department	of state's records.			
	cifies a delayed effectively after the record is file.		an effective time,	at 12:01 a.m. on	the earlier
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Dated	KMBER 22		_ · _		
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	Signature	of a member or authori	zed representative of a me	ember	

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Filing Fee: \$25.00