## L21000428749

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## <sup>†</sup>COVER LETTER

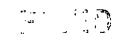
TO:	Registration So Division of Cor			
	NOLASCO	HOME IMPROVEMENTS I	lC.	
SUBJ	ECT:	<del></del>		
		Name of Lin	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		OSCAR A NOLASCO CA	ASTILLO	
			Name of Person	
		NOLASCO HOME IMPR	OVEMENTS L.L.C.	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	<u></u>
		1308 E OLIVE RD		
			Address	<u></u>
		PENSACOLA, FLORIDA	32514	
		OSCARARMANDO205@0	City/State and Zip Code GMAIL.COM	<del></del>
		E-mail address: (	to be used for future annual report noti	fication)
For furt	her information co	oncerning this matter, please c	all:	
VALER	IA BARAHONA		850 288-2196	
			at ()	
	Name of	Person	Area Code Daytini	e Telephone Number
Enclose	d is a check for the	e following amount:		
<b>≅</b> \$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 Address:

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

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



<u>Nolarw Ho</u>	me Imp	novements L.L.C.		
( <u>Name of the Limite</u>	<u>d Liability Comp:</u> A Florida Limited	any as it now appears on our records.) Liability Company)	O ANTON O SELECTION OF THE	
The Articles of Organization for this Limited Lia Florida document number	ability Company	were filed on	and assigned	
This amendment is submitted to amend the follo	wing:			
<b>A.</b> If amending name, enter the new name of N/A	the limited liab	oility company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.L.C."	
Enter new principal offices address, if applica	· · · · · · · · · · · · · · · · · · ·			
(Principal office address MUST BE A STREET ADDRES		PENSACOLA, FL 32514		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u>30X)</u>	1308 E OLIVE RD PENSACOLA, FL 32514		
B. If amending the registered agent and/or reagent and/or the new registered office address  Name of New Registered Agent:		address on our records, <u>enter the</u>	name of the new registered	
	NIA			
New Registered Office Address:	MIN	Enter Florida street address	<del></del>	
		, Florid	a	
		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>	Address	Type of Action
AMBR	MARLENY HUETE MEJIA	1308 E OLIVE RD PENSACOLA, FL 32514	<b>≣</b> Add
			□Remove
			□Change
			□Add
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		<u> </u>		
ective date, if other than the effective date is listed, the date is effective date in this ument's effective date on the	nust be specific and cannot be block does not meet the	applicable statutory	g or more than 90 days after filing requirements, this	filing.) Pursuant to 605 020
cord specifies a delayed effec s filed.	tive date, but not an effec	etive time, at 12:01	a.m. on the earlier of: (b	The 90th day after the
May 4th	2022			
ed		- <u>·</u>		
126/160				

Typed or printed name of signee