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COVER LETTER

TO: Registration Sec Division of Corp			
	E REPAIR LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	nitted for filing.	
	ndence concerning this matter		
	FRED WHITFIELD		
		Name of Person	
	FWA HOME REPAIR LL	C	
		Firm/Company	
	1975 WOODLAND AVE		
		Address	
	NEW SMYRNA BEACH	FL 32168	
		City/State and Zip Code	
	FAWHOMEREPAIR@GM		
		to be used for future annual report no	titication)
For further information of	concerning this matter, please c	all:	
FRED WHITFIELD		386 689 9166 at ()	
Name o	of Person	Area Code Daytii	me Telephone Number
Enclosed is a check for t	he 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 Addre		Street Address: Registration S	ection
Registration Division of 0		Division of Co	
P.O. Box 632	27	The Centre of	
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FWA HOME REPAIR 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 filed on MARCH 26 2020 Florida document number L20000090058 This amendment is submitted to amend the following:	and assigned
A. If amending name, enter the new name of the limited liability company here:	
FAW HOME REPAIR LLC	no abbreviation "L.C."
FAW HOME REPAIR LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the new name must be distinguishable and contain the words "Limited Liability Company," the designation of the new name must be designated by the new name must be designated by the new name of t	ic advice lation .
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 agent and/or the new registered office address here:	
Name of New Registered Agent:	•
New Registered Office Address:	
Enter Florida street address	•
, Florid	Zip Gode
City·	••
New Registered Agent's Signature, if changing Registered Agent:	$\frac{\partial V}{\partial x}$
I hereby accept the appointment as registered agent and agree to act in this capacity. I furthe provisions of all statutes relative to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. being filed to merely reflect a change in the registered office address. I hereby confirm that the	Or, if this document is

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amenaling Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□ Add
			□Rcmove
			Change
			□Add
			Change

amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	he date of filing:
record specifies a delayed effect d is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
June 21	2021
7alcu	
	Signature of a member or authorized representative of a member
FRED WHITFIELD	

Filing Fee: \$25.00