L08000075424

(Requestor's Name)	
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(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	

A. LUNT

OCT 21 2008

EXAMINER

Office Use Only



900137059849

10/20/08--01014--006 **25.00



COVER LETTER

COVER LETTER	
TO: Registration Section Division of Corporations	
SUBJECT: Florida Property Maintenance & Premodeling LL C (Name of Limited Liability Company)	ئ
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Josue Martinez (Name of Person) Florida Property Maintenance & Remodeling LL (Firm/Company)	. (
P. 0 Box 772287 (Address) AET	I TO BERT
Miami, FL 33177 (City/State and Zip Code) For further information concerning this matter, please call:	70 111 60
≫	•
Josue Martinez (Name of Person) (Name of Person) (Area Code & Davtime 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)

□\$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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Lie	bility Company	y as it now annears on ou	r records.)	<u> </u>
(<u>Name of the Limited Lia</u> (A Flo	rida Limited Lia	ibility Company)		
The Articles of Organization for this Limited Liabi Florida document number <u>L08000075</u>	lity Company w <u>424</u> .	vere filed on	16/08	_ and assigned
This amendment is submitted to amend the followi	ng:			
A. If amending name, enter the new name of th	e limited liabil	ity company here:		
The new name must be distinguishable and end with th	e words "Limito	ed Liability Company," the	e designation "LLC	
Enter new principal offices address, if applicabl	e:	***	SECON ALLA	700 T
(Principal office address MUST BE A STREET A		2	HASSEE. FU	20 M
Enter new mailing address, if applicable:	4.0. Box 7	72289	1.27 	
(Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 7 Miami, Fl	331 727	
B. If amending the registered agent and/or registered agent and/or the new registered office. Name of New Registered Agent:	address here:	:		
Name of New Registered Agent.		11191 111102	11	
New Registered Office Address:	7867	W 36 Auc (Enter Flo	# [03 orida street addre	
	Hialea	Martinez W 36 Ave (Enter Fla (City)	, Florida -	33018 (Zip Code)
New Registered Agent's Signature, if changing Reg	istered 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 608, 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 Changing Registered Agent, Signature of New Registered Agent)

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action Title Address Name 4 AMILETT (ASTILLO 15248 SW 179 TERRACE MIAMI, FL 33187 MGR 50SUE MANTWEZ 17867 W 36 AVE # 103 Add Higlegh, FC 33018 Rem MAG ☐ Remove ☐ Add Remove _ Add ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00