Ø 001/005

Page 1 of 2

Florida Department of State

Division of Corporations Public Access System

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THE HOME RE-MODELING TEAM LLC

Certificate of Status	0
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2/24/2009

02/24/2008 10:43 FAX

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Page 2 of 2

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Electronic Filing Menu Corporate Filing Menu

Help

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COVER LETTER

TO:	Registration S Division of Co			
SUBJE	CT. THE HO	ME RE-MODELING TE	EAM LLC	
			ited Liability Company)	
The end	losed Articles of	'Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following;	
		Francyne Carrillo		
			(Name of Person)	
		Legalzoom.com, Inc.	(Firm/Company)	
		7083 Hollywood Blvc	1., Suite 180 (Address)	
		Los Angeles, CA 90		
			(City/State and Zip Code)	
For furt	her information of	concerning this matter, please o	all:	
Franç	rancyne Carrillo (Name of Person) at (323) 962-8600 (Area Code & Daytime Telephone Number)			Celephone Number)
Enclose	d 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassoe, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Ø 004/005

09 FEB 24 AM 7: 55

SECRETARY OF STATE FALLAHASSEE PLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE HOME RE-MODELING (Name of the Limited L. (A.F.	TEAM LLC isblitty Company as it now appears on outlorida Limited Liability Company)	ır records.)	
The Articles of Organization for this Limited Liab	oility Company were filed on 01/30/20	09 and assigned	
Florida document number <u>L09000010149</u>	 '		
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	ne limited liability company here:		
The Florida Home Remodeling Group LI The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our rec e address here;	ords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	/Fator Flo	prida street address)	
	. Florida		
•	(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 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)

Minending 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 Name Address ∐ ∧dd Keinove Remove □Add Remove Add Reniove ☐ Add Remove]∧da Remove D. If amending any other information, enter change(s) here: (Attach additional sheats, if necessary.) ived representative of a member

Page 2 of 2
Filing Fee: \$25.00

Typed or printed name of signee

Derek Gallaway, Member