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COVER LETTER

Division of Co	orporations		
SUBJECT:	GENE'S HOME	IMPROVEMENT LLC	
		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	condence concerning this matte	r to the following:	
		Shannon Kinney	
		Name of Person	
		Firm/Company	
		1503 24th Ave W	
		Address	
		Palmetto FL 34221 City/State and Zip Code	
	E-mail address: (to be used for future annual report notifica	tion)
For further information	concerning this matter, please o	eall:	
	annon Kinney of Person	at (941) 72 Area Code & Daytime T	23-7283 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)
B F A WE	ING ADDRESS		

MAILING ADDRESS:

Registration Section

TO:

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

FILED:

2011 NOV 14 PM 3: 04

GENE'S HOME IMPROVEMENT LLC SEGME TALLY 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	09/29/2010	and assigned
Florida document number L10000101962			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company her	<u>re</u> :	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADL	DRESS)		
T) 4			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		our records, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida 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

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 <u>Title</u> <u>Name</u> **Address** MGR Joseph Tomkins 2328 30th Ave E .[√] Add Bradenton FL 34208 Remove ☐ Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 11 2011 Dated Signature of a member or authorized representative of a member Shannon Kinney Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00