## L10000105716

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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April 6, 2020

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

## RE: "Whatever" Home Improvements & Renovations, LLC

To Whom It May Concern:

Enclosed with this letter please find the following:

- 1. The articles of Amendment for the above referenced entity;
- 2. A check for \$25 for the Filing Fee;
- 3. A pre-addressed envelope.

Please file and return the certificate to me in the enclosed envelope. If you have any questions or concerns regarding this filing please call me at 800-706-4741.

Sincerely yours,

Jasmine Barkum Organizer

## **COVER LETTER**

Divi	ision of Cor	porations		•	
SUBJECT:	"Whatever'	' Home Improvements & Reno	ovations, LLC	2020 APR 15	AH 12: 37
		Name of Lin	nited Liability Company		
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Jasmine Barkum			
			Name of Person		<del></del>
			Firm/Company	<del></del>	
		3225 McLeod Drive, Suite	e 100		
			Address		<del></del>
		Las Vegas, Nevada 89121			
		·	City/State and Zip Code		<del></del>
		ra@andersonadvisors.com			
		E-mail address: (	to be used for future annual	report notification)	
For further in	formation co	oncerning this matter, please co	all:		
Jasmine Bark			at ()	6-4741	
	Name of	Person	Area Code	Daytime Telephone	Number
Enclosed is a	check for the	e following amount:			
■ \$25.00 Fi.	ling F <del>ee</del>	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	closed) C	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)

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

	2022	$r \in D$
"Whatever" Home Improvements & Renovations, LL	.c <sup>2020</sup> APR 15	•
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our record	
(A Florida Limited	Liability Company)	1: 50
The Articles of Organization for this Limited Liability Company	, were filed on 10/11/2010	-
	were med on	and assigned
Florida document number L10000105716		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
	3225 McLeod Drive, Suite 100	
Enter new principal offices address, if applicable:	5225 NICECCO DITVE, Suite 100	, Las vegas, 14 v 67121
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	
Enter new mailing address, if applicable:	3225 McLeod Drive, Suite 100	, Las Vegas, NV 89121
(Mailing address MAY BE A POST OFFICE BOX)		
The state of the s		
		<del></del>
B. If amending the registered agent and/or registered of	ffice address on our records	anter the name of the name
registered agent and/or the new registered office address her	e:	, enter the name of the nev
	_	
Name of New Registered Agent:		
Number (1994 Registered Algent)		
New Registered Office Address:	<u>.</u>	
	Enter Florida street address	•
	, Flo	rida
	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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	Type of Action
MGR	Cynthia Steele	3225 McLeod Drive, Suite 100	<b>_</b> ■ Add
		Las Vegas, NV 89121	□ Remove
		·	☐ Change
			Add
			☐ Remove
			☐ Change
			□ Add
		<del></del>	☐ Remove
			Change
			□ Add
			□ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			□ Change

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
<del></del> -	
<del></del>	
(If an effect <u>Note:</u> If	e date, if other than the date of filing:
the recor	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated	4-6,20.
	Signature of a member or authorized representative of a member
	James McKee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00