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**EXAMINER** 

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то:	Registration S Division of Co				
SUBJE	СТ		REMODELING LLC		
501012			ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are su	omitted for filing.		
Please r	eturn all corresp	ondence concerning this matter	to the following:		
		K	RISTOPHER STEFANI		v 1
			Name of Person		
		UPR	GHT REMODELING LLC		
			Firm/Company	······································	
		4115	LONGFELLOW DRIVE		4.1 <sup>1-</sup>
		<u> </u>	Address		
		P	LANT CITY FL 33566		SHERE ALL
		••	City/State and Zip Code		11
		E-mail address: (	fani37@yahoo.com to be used for future annual report notificati		تحمه <sub>الع</sub> رم
For furt	her information of	concerning this matter, please of	call:		
	KRIST	OPHER STEFANI	at ( <u>813</u> ) 20	)-7157	
	Name o	of Person	Area Code & Daytime Te	ephone Number	
Enclose	d is a check for t	he following amount:			
<b>₽</b> \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	35	

**COVER LETTER** 

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## UPRIGHT REMODELING LLC

(	Name of the Limited Liability Company as it now appeared (A Florida Limited Liability Company)		
The Articles of Organizatio	n for this Limited Liability Company were filed on	01/01/2011	and assigned
Florida document number	L10000131774		

This amendment is submitted to amend the following:

•

## A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)	
	Spr. 8

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	William J. Mueller	4115 Longfellow Drive Plant City FL 33566	Add Remove
			Add Remove
			_ Add _ Remove
		۸۲ ۲۰۰۰	
		۲۰۰ ۲۰۰ ۲۰۰ ۲۰۰ ۲۰۰ ۲۰۰ ۲۰۰ ۲۰۰ ۲۰۰	Add:
D. If amendin	g any other information, enter change(s	) here: (Attach additional sheets, if necessary.)	
		· · · · · · · · · · · · · · · · · · ·	-
			-
Dated	<u>May 23, 2011</u>		
_		authorized representative of a member <u>her</u> <u>Stefan</u> printed name of signee	
		Page 2 of 2	
	fun	ng Fee: \$25.00	