11/1/2018

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180003158103)))



H180003158193ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From;

Account Name : BUSINESS WORLD TRANSACTIONS, INC.

Account Number : 104512800707

Phone : (305)803-2736

Fax Number

: (305)646-1527

Enter the email address for this cusiness entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LIESEGANG REMODELING, LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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3. PRATHER

Electronic Filing Menu Corporate Filing Menu

Help

p.2

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ARTICLES OF AMENDMENT *
TO
ARTICLES OF ORGANIZATION
OF

	•	3
LIESEGA	NG REMODELING, LLC.	
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)	173
The Articles of Organization for this Limited Liability Florida document numberL12006027106		SSC Rand assigned
This amendment is submitted to amend the following:		Lu
A. If amending name, enter the new name of the lig	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited 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 ADD	PRESS)	
Euter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ade	istered office address on our records, <u>e</u> dress here:	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florido strem address	
	Florid	34
	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>	Address	Type of Action	
			D Add	
			□ Remove	
			☐ Change	
			Add	
			Remove	
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			Change	

	D. If amending any other information, enter change(s) here: (Attach additional		
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