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ACCOUNT NO. : I2000000195 REFERENCE : 163678 AUTHORIZATION / COST LIMIT : \$ 25.00 ORDER DATE: April 10, 2012 ORDER TIME : 3:31 PM ORDER NO. : 163678-005 CUSTOMER NO: 7881329 DOMESTIC AMENDMENT FILING NAME: KREATIVE REMODELING SPECIALIST, LLC EFFECTIVE DATE: XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| RREATIVE REMODELING SPECIALIST, LLC |
|--|
| (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 04/10/2012 and assigned |
| Florida document number L12000049027 |
| This amendment is submitted to amend the following: |
| A. If amending name, enter the new name of the limited liability company here: |
| KREATIVE REMODELING SPECIALISTS, LLC |
| The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviatio "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) |
| |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the new |
| registered agent and/or the new registered office address here: |
| Name of New Registered Agent: |
| Traine of New Registered Agent. |
| New Registered Office Address: (Enter Florida street address) |
| (Enter Florida street address) \\ \rightarrow \rightarrow \\ \rightarrow \\ \rightarrow \rightarrow \\ \rightarrow \rightarrow \\ \rightarrow |
| , Florida (A) |
| (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 Recompty 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member heing added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type of Action ☐ Add ☐ Remove ☐ Remove ☐ Add ☐ Remove □ Add ☐ Remove .□ Remove DbA □ _□ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Christopher L. Harris Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00