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SEGRETARY OF STATE
ALLAHASSEE, FLORIDA

FEB 12 2018 B. KOHR

## **COVER LETTER**

TO: Registration Division of C	n Section ' Corporations		
SUBJECT:	Superior Name of Limit	Remodeling deling ded Liability Company	and Renovation, LLC
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	To The second
		Name of Person	
	Superio	r Remodeling a	and Renover, LLC
	5627	Raleigh St.	······································
	Hollywo Sup E-mail address: (1	City/State and Zip Code  Serior Remod & Code  o be used for future annual report notification	nmail · Com
For further information	on concerning this matter, please co		
One //	o Perez	at (754) 423 - 9 Area Code & Daytime Te	elephone Number
Enclosed is a check fo	or the following amount:		
<b>2</b> \$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)

**MAILING ADDRESS:** 

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

Superior Remode (Name of the Limited Liability Company (A Florida Limited Lia	ling and Reprositation (
(A Florida Limited Lia	ability Company)
The Articles of Organization for this Limited Liability Company v	were filed on 10/16/2012 Sand and gned
Florida document number <u>L 12000 131 461</u>	TO TO THE TOTAL TO
This amendment is submitted to amend the following:	<b>Y</b>
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	5740 Taft St.
(Principal office address MUST BE A STREET ADDRESS)	5740 Taft St. Hollywood, FL 33021
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5740 Taft St. Hollywood, FC 33021
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Liner Fiorida sireei adaress
	, 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>Address</u> Title Name Onelio Perez 5627 Raleigh St. Wadd

Hollywood, FL33021 Remove Remove Remove Remove Remove Remove

If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ed	2/4/2013
<u>.</u>	ane P
	Signature of a member or authorized representative of a member
	Onelio Peroz
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00