L14000161889

(Re	questor's Name)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity N	ame)
(Do	cument Numbe	er)
Certified Copies	_· Certificat	es of Status
Special Instructions to	Filing Officer:	
		i
·		

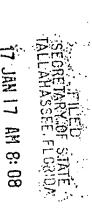
Office Use Only



700293026537

01/17/17--01013--006 **25.00

JAN 1 8 2017 S. YOUNG



COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	STONE WOLLD Name of Limit	HUME REMUDELIS	NO LIC	
	f Amendment and fee(s) are sub-	_		
Please return all corresp	condence concerning this matter	to the following:		
		Q Arangu Name of Person		
	5+	rune World Hare 1	lemodely LLC	
	10669 Sw	754h +Crv Address	, where .	1 55
	O(a\a	FL 34476 City/State and Zip Code		17 Jan 17 AM 8: 08
	E-mail address: (1	y house 6 smail. Cobe used for future annual report notific	ation)	HH 8:
For further information	concerning this matter, please ca	dl:		08
Carolina	of Person		7 8 24 Telephone Number	
Enclosed is a check for	-			
\$25.00 Filing Fee	☐ \$96.60 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)	
	LING ADDRESS: tration Section	STREET/COURIE Registration Section		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

STONE WOKED HOME	REMODELING LLC
(Name of the Limited Liability Compar (A Florida Limited L	
The Articles of Organization for this Limited Liability Company Florida document number \(\bigcup \frac{14000 \lambda \lambda \text{89}}{2000 \lambda \lambda \text{89}} \).	were filed on 10 16 14 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	llity company here:
HOME INNOVATION DESIGN	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6160 SW HWY 200
(Principal office address MUST BE A STREET ADDRESS)	Ocala FL 34476
	ALC ALL
Enter new mailing address, if applicable:	10669 SW 75th km = 50
(Mailing address MAY BE A POST OFFICE BOX)	Ocala FL 34476 = 776
 -	EA POST OFFICE BOX) O(ald FL 34476
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	nce address on our records, enter the name of the new
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 accent the appointment as registered agent and agree	ee 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 = 1 AMBR = .	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
		-	Change
			Remove
			☐ Change
			TI Addition To Service
			Remove SSR
			Changer
		/	Change 8: 0210
			Remove
			Change
·			
			Remove
			☐ Change
			Add
	(Remove
		•	☐ Change

					<u></u>
					
	<u> </u>				
	* . .				
			/		
					
		/			<u> </u>
	•				
					779
-					
		/			
					os
on effective date is lis ote: If the date ins	her than the date of ted, the date must be speci erted in this block does date on the Departmen	ific and cannot be prior to do not meet the applicable	ate of filing or more than 90 e statutory filing requiren	(optional) days after filing.) Pursuant tents, this date will not b	10 605.0207 be listed as
	es a delayed effect fter the record is t	tive date, but not a filed.	n effective time, at	12:01 a.m. on the	earlier of
record specific The 90th day a					
The 90th day a	$\overline{}$, <u>2017</u>	•		
record specific The 90th day a	Ca	alina Aco	ed representative of a memb	er	with the same

Page 3 of 3

Filing Fee: \$25.00