LI50000144	57

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

100307056921

12/29/17--01020--022 \*\*30.00



Office Use Only

# **COVER LETTER**

· . ·

TO:		stration Se sion of Cor				
		Global Con	struction and Home Repair LL	C.		
SUBJE	CT:					
			Amendment and fee(s) are sub ndence concerning this matter			
			Michael Walker			
				Name of Person		
			Global Construction and E	lome Repair I.I.C.		
				Firm/Company		
			PO BOX 1923			
				Address		
			Valrico, FI 33595			
				City/State and Zip Code		
			globalchrepair@gmail.com	to be used for future annual rep		
For fur	ther in	formation o	oncerning this matter, please ea	-	(A homeanon)	
			oncerning this matter, prease ea		<b>7</b> 55.4	
Michae	21 P. W	Name o	610	at ()	914 Daytime Telephone Number	
		Nume o	L Person	Area Code	Daytime Telephone Number	
Enclose	ed is a	check for th	ne following amount:			
□ \$25	5.00 Fi	ling Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>□ \$60.00 Filing Fee, Certificate of Status &amp; Certified Copy (additional copy is enclosed)</li> </ul>	
		Registr Divisio	ING ADDRESS: ation Section n of Corporations ox 6327	Registration	Corporations	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Global Construction and Home Repair LLC.

#### (<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on  $\frac{1/26/2015}{1.15000014451}$  and assigned Florida document number  $\frac{1.15000014451}{1.15000014451}$ .

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

#### 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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	Michael Walker			7 BEC (	
New Registered Office Address:			Sin -		
	Enter Florida street add	tress		3	: •
		Florida _		1	وریست (ری د
	Cuy	-	<u></u> Zip	( <b>idd</b> e	-

#### 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.

Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

## MGR = Manager AMBR = Authorized Member

•

.

<u>Title</u>	Name	Address	Type of Action
owner	Melissa Walker	522 S Saint Cloud Ave	🖸 Add
		Valrico, Fl 33594	🛛 Remove
			Change
owner	Michael Wałker	522 S Saint Cloud Ave	🖬 Add
		Vatrico, Fl 33594	
			Change
			🗆 Add
			Remove
			Change
<u> </u>			🗖 Add
			Remove
			Change
			Add
			Remove
			Change
		<u>.</u>	Add
			Remove
		<u> </u>	Change

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

- ,	
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
	 `•
	·····
	·· ·
	(c./
	· ()
	1. N. N.
	i an and
	—·
	· · · · · · · · · · · · · · · · · · ·
	17 BEC 29 MM 7: 25
	6D
	EC 29 MM 7: 25

E. Effective date, if other than the date of filing: \_\_\_\_\_\_(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	12-23-11	
	Jul VINal	
	Signature of a member or authorized representative of a member	_
	Michael Walker	
	Typed or printed stame of Signee	-

Page 3 of 3

Filing Fee: \$25.00