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COVER LETTER -

To –

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Please send letter of acknowledgement to-

Olga L. Giraldo 14902 N Florida Av. Suite B Tampa, Fl 33613 813-400-1617

COVER LETTER

TO: **Registration Section Division of Corporations**

'n

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Real House General Services LLC

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SUBJECT: _____

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Olga L. Giraldo			
		Name of Person		
	Real House General Services, LEC			
	Firm/Company			
	3257 Susan Dr.			
	·	Address		
	Spring Hill FL, 34606			
	realhouse.llc@gmail.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report not	illication)	
For further information c	oncerning this matter, please c	all:		
Olga L. Giraldo		813 953-6675		
Name of Person		at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for th	he following amount:			
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

Mailing Address: **Registration Section** Division of Corporations P.O. Box 6327

Street Address: **Registration Section** Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Real House General Services, 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 ______ and assigned Florida document number L15000046615

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Optim Build Group, LLC

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) 14902 N. Florida Ave. Suite B

Tampa, FL 33613

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 218 E. Bearss Ave

Tampa, Florida 33613

Box # 307

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here: agent and/or the new registered office address here:

Name of New Registered Agent:	N/A		1:0V	
New Registered Office Address:	N/A		<u>q</u>	ា រូបខ្ល
		Enter Florida street address	<u>ب</u>	
		. Florida	32	
			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 mv 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.

NIA

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
			□Add
			Change
			🖸 Add
			□Remove
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			□Add
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			🗆 Add
			□ Change
			🗆 Add

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

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	January 1, 2024	
ve date, if other than the date of fi ective date is listed, the date must be specific	iling:	(optional)

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.

11/	1/2023		
Dated		·	
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		Signature of a member or authorized representative of a member	_
	Olga Giraldo	\mathcal{T}	
		Typed or printed name of signee	