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S. WARREN JUL 17 2017

COVER LETTER

	EXTERIOR FINISHES LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	Amendment and fce(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
	KENNETH CREEL JR
	Name of Person
	FLORIDA EXTERIOR FINISHES LLC
	Firm/Company
	4727 Alexandria Ct
	Address
	Palmutto FL 34221
	City/State and Zip Code FLexterior finishes @ amai/com E-mail address: (to be used for future annual) report notification)
For further information c	concerning this matter, please call:
KENNETH CREEL JR	813 440-0743 at ()
Name o	of Person Area Code Daytime Telephone Number
Enclosed is a check for the	he following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status (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

FLORIDA EXTERIOR FINISHES LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	nany as it now appears on our records.) Liability Company)	·····
The Articles of Organization for this Limited Liability Company Florida document number L115000147579	y were filed on <u>08/28/2015</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab		
Enter new principal offices address, if applicable:	4727 Alexan	dria Ct
(Principal office address MUST BE A STREET ADDRESS)	Palmetto FL	
		3/1221
Enter new mailing address, if applicable:	4727 Alexand	ria Cf
(Mailing address MAY BE A POST OFFICE BOX)	Palmetto FL	ria CF
		34221
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		ter the name of the r
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
N	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	L	
I hereby accept the appointment as registered agent and agr		
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as		
being filed to merely reflect a change in the registered office		

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

company has been notified in writing of this change.

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
MGR	KENNETH CREEL JR	4727 Alexandria Ct Palmetto FL 34221	Add
		Palmetto FL 34221	Remove
			Change
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·	, enter change(s) here: (Attach additional sheets,	y
fective date, if other than the dat	te of filing: specific and cannot be prior to date of filing or more than 90 da	(optional)
an effective date is listed, the date must be bete: If the date inserted in this block becument's effective date on the Depar	does not meet the applicable statutory filing requirement	ys after filing.) Pursuant to 605.020 nts, this date will not be listed a
record specifies a delayed ef The 90th day after the record	fective date, but not an effective time, at 12 is filed.	::01 a.m. on the earlier o
June 22	2017	
1/	400	3 8 →
Jen si	nature of a member or authorized representative of a member	
KENNETH CREEL JR		
·	Typed or printed name of signee	ind 📤 in
	Typed or printed name of signee	PH 3: OF STA E. FLOR

Filing Fee: \$25.00