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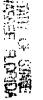
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## **COVER LETTER**

TO: 'Registration Sec Division of Corp			e 🖟 🖟
SUBJECT:	Carpentry te	MOVATIONS ULIC	<u> </u>
		The Markey is	*.
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	·
	Jaime Ray	Name of Person	
•	Atom Carpent	Renovations U LI	LC
	3935 Cald	Well DY. Address	<del></del>
	Tallahassee,	City/State and Zip Code	<del></del>
	Apluse O Pro	mail. Com o be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca		•
Ray Hernan	<u>JU1</u> Person	at (950) 545.4 Area Code Daytime	7727 Telephone Number
Englosed is a check for th	e following amount:		
☐ \$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



15 OCT -5 PM 12: 09

A+ Carpenty Reno	vations U LLC	SHORETARY OF STREET
( <u>Namefof the Lifnited Liabil</u> (A Florid	lity Company as it now appears on a da Limited Liability Company)	our records.
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	$\frac{28/5}{5}$ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi registered agent and/or the new registered office add		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	
	City	, Florida 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 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

MGR= N	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Ratael Frias	1630 Stanley Ave.	□ Add
	·	Tallahassee, Fl. 32318	□ Remove
4. 4 a .O			Change
AMMK.			Add
			□ Remove
. 40			Ziveriange
MGR	Edward Garcia	3935 Coldwell Dr. Tallahassee, Fl. 32310	
		Tallahassee, Fl. 32310	D Remove
			Change
			🗆 Add
			Remove
			Change
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. If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

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ment's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.	m. on the earlier of:
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Signature of a member or authorized representative of a member	
Signature of a monotor of duality and a monotor	
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Page 3 of 3

Filing Fee: \$25.00