L15000148715

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COVER LETTER

		stration Sec sion of Corp					
cub ica	ът.	Himes Build	ling Services, LLC				
SUBJEC	, l i ,		Name of Lim	ited Liability Company			
The enclo	osed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please re	turn	all correspon	idence concerning this matter	to the following:			
			Carl W. Himes				
				Name of Person			
			Himes Building Services, I	LLC			
				Firm/Company			
			6603 Plover Court				
				Address			
			Seffner, FL 33584				
				City/State and Zip Code			
			himesbuildingservices@gm				
			E-mail address: (t	o be used for future annual report noti	fication)		
For furthe	er in	formation co	ncerning this matter, please ca	ill:		3	- :- - :-
Carl W.	Him	es		813 765-5494 at ()		(5)	
		Name of	Person		e Telephone Number	===	다음(1) - 11일(1) - 11년
Enclosed	l is a	check for the	following amount:			2: 28	35
\$25.0	00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is er	utus &	0KS

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

Himes Building Services, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	nny as it now appears on our records.) Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Company	were filed on August 31, 2015	and assigned
Florida document number L15000148715		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		19 (25)
(Mailing address MAY BE A POST OFFICE BOX)		5 22
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		the name of the new
registered agent and/or the new registered office address ner	<u>r</u> .	ale Chor
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Ciţy	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

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Diana L. Himes	6603 Plover Court	
		Seffner, FL 33584	
			■ Remove
			☐ Change
AMBR	Diana B. Himes	6603 Plover Court	= Add
		Seffner, FL 33584	_
			Remove
			Change
AMBR	Carl W. Himes	6603 Plover Court	Add
		Seffner, FL 33584	_
			■ Remove
			Change
MGR	Carl W. Himes	6603 Plover Court	⊟ Add
		Seffner, FL 33584	
			Remove
			Change
			
			Remove
			Change
		<u> </u>	
			Remove
			Change

). If amending any other inform	ation, enter change(s) here	: (Attach additional sheets, if nec	essary.)
			
			
·			
	-		
			
			
E. Effective date, if other than the (If an effective date is listed, the date many Note: If the date inserted in this bedocument's effective date on the inserted in the listense of the list	block does not meet the application	(option of date of filing or more than 90 days after the statutory filing requirements, this	onal) r tiling.) Pursuant to 605.0207 (3)(s date will not be listed as the
f the record specifies a delayed b) The 90th day after the re	ed effective date, but no cord is filed.	an effective time, at 12:01	a.m. on the earlier of:
Dated June 5	2019	_·	
		rized representative of a member	
	Signature of a member or author	rized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00