L15000206039

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COVER LETTER

TO: Registration Section

Div	ision of Cor	porations					
,	RT Home F	Remodeling					
SUBJECT:		Name of Lim	ited Liability Company				
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	i all correspo	ondence concerning this matter	to the following:				
		Raul Torres					
			Name of Person	· ···	_		
		RT Home Remodeling					
			Firm/Company				
		4939 Beckham Ct.					
			Address		- 5.,	2	
		North Port, FL 34288			<u> </u>	2023	•
			City/State and Zip Code	·	- 3		
		rthomeremodeling@yahoo.	com to be used for future annual rep	art natification	<u>.</u>	,	ı
For further in	nformation c	oncerning this matter, please c	•	and inclined tony			
Raul Torres			941 58724 at ()	180	,0 A	Ö	
	Name o	f Person		Daytime Telephone Number	:r		
Enclosed is	a check for th	he following amount:					
□ \$25.00 I	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	ate of Sta	atus &	
Re	iling Addres	Section		on Section			
	vision of C D. Box 632	Corporations 27		of Corporations re of Tallahassee			
Та	Hahassee, I	FL 32314	2415 N. N	Aonroe Street, Suite	810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Company as it now appears on our records.) Velorida Limited Liability Company)
The Articles of Organization for:this Limited Liab Florida document number L15000206039	bility Company were filed on 12/10/2015 and assigned
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	the limited liability company here:
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE Bo	ox)
B. If amending the registered agent and/or reg agent and/or the new registered office address	gistered office address on our records, enter the name of the new register here:
Name of New Registered Agent:	1 / _
New Registered Office Address:	Enter Florida street address
	, Florida

New Registered Agent's Signature, if changing Registered Agent:

RT Home Remodeling

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 added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
ambr	Gwendoline Perez	4939 Beckham ct. North Port, Fl 34288	
			□Remove
ambr	Cindy Cruz	4939 Beckham ct. North Port, Fl 34288	= Add
			Remove
			Change
			SE DAdd
			□Remove
			Change O
			□Add
			□Remove
			□Change
			□ Add
			□Remove
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			□Add
			Remove
			□Change

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