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SECRETARY-DESTATE
ALLAHASSEE, FLORIDA
AT APR 28 PM 11: 50

MAY 0 1 2017 S. YOUNG

COVER LETTER

TO: Registrati Division o	on Section f Corporations	
Daryl' SUBJECT:	s Custom Woodshop & Home Remodeling LLC.	
SUBJECT:	Name of Limited Liability Company	
	es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following:	
	Daryl Jones	
	Name of Person	
	Daryl's Custom Woodshop & Home Remodeling LLC.	
	Firm/Company	
	5230 Land O Lakes Blvd. Unit 2108	
	Address	إيطيب
	Land O Lakes Fl 34639	7 APR 20
	City/State and Zip Code	3.7.2 3.7.2
	Daryl@darylscustowoodshop.com	:
	E-mail address: (to be used for future annual report notification)	•
For further informat	ion concerning this matter, please call:	
Daryl Jones	813 843-1198 at ()	
N	ame of Person Area Code Daytime Telephone Number	
Enclosed is a check	for the following amount:	
■ \$25.00 Filing Fe	Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	atus &
	AILING ADDRESS: STREET/COURIER ADDRESS: egistration Section Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Daryl's Custom Woodshop & Home	•			
(Name of the Limite	d Liability Compa A Florida Limited	iny as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited Lie Florida document number L16000034546	and assigned			
	·			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here	:	
The new name must be distinguishable and contain the we	ords "Limited Liabi	lity Company " the desi-	onation "I I C" or the abb	reviation 1. Company
Enter new principal offices address, if applica		2433 S 86th St. Su	_	TO ALL
(Principal office address MUST BE A STREET		Tampa Fl. 33619		28 55.75
				70 770
Enter new mailing address, if applicable:		5230 Land O' Lake	es Blvd.Unit 2108	111: 50 111: 50
(Mailing address MAY BE A POST OFFICE I	BOX)	Land O' Lakes F1 3	34639	- 1
B. If amending the registered agent and/or the new registered off			ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	Daryl Jones		J	
New Registered Office Address:	8134 Carlton Ridge Drive			
		Enter Florida	street address	
	Land O' Lakes	City	, Florida 3463	Zip Code
		Cuy		zip couc

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 chapte.

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>	<u>Address</u>	Type of Action
AP	Daryl Jones	8134 Carlton Ridge Drive	Add
		Land O' Lakes Fl 34638	□ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
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ective date, if other than the date of filing:	(Ohtsonat)	
effective date is listed, the date must be specific and cannot be prior to date of filing or more. If the date inserted in this block does not meet the applicable statutory filing	re than 90 days after filing.) Pursuant to 605	5.0207 (3 ed as th
rument's effective date on the Department of State's records.	requirements, this time will not be not	
record specifies a delayed effective date, but not an effective tir	me, at 12:01 a.m. on the earli	er of:
he 90th day after the record is filed.		
4/25		
ed 4/25 . 2017		
	f a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00