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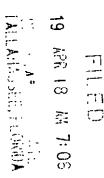
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APR 2 7 2019 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ALC Home Improvement CCC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MANUELA CEBALLOS Name of Person
ALC Home Improvement LLC Firm/Company
36) GREGORY RD Address
City/State and Zip Code akayocelallus Z@ Gmail. com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HANUELA CEBALLOS at (561) 3708922 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

TO ARTICLES OF ORGANIZATION **OF**

	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited L	Liability Company were filed on 03/21/2016	and assigned
lorida document number _L1600004		
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name o	of the limited liability company here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applic		
Principal office address MUST BE A STREE	ET ADDRESS)	
		9
Inter new mailing address, if applicable:		注:
(Mailing address MAY BE A POST OFFICE BOX)		Maria CO F
		<u> </u>
If amonding the posistored agent and	l/or registered office address on our records, ent office address here:	er the name of the
. If amending the registered agent and	effice address home.	
egistered agent and/or the new registered o	nnce address here:	
egistered agent and/or the new registered o		
egistered agent and/or the new registered o		
	MANUELA CEBALLOS	
Name of New Registered Agent:	MANUELA CEBALLOS 361 Gregory Rd Enter Florida street address	
Name of New Registered Agent:	MANUELA CEBALLOS	

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DLUARO CEBAILLS	361 Greeory 2d	Add
			Remove
		Change	
	, , , , , , , , , , , , , , , , , , ,	Remove	
		Change	
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			Add
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			Change

•	
'ffect	ive date, if other than the date of filing:(optional)
f an ef	Fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3
<u> Note:</u>	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
locun	nent's effective date on the Department of State's records.
	de la light de de la lace de l'étable de la desta de la lace de l'action de la 19.01 de la lace de la cardia de
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The	90th day after the record is filed.
3010d	4/16/19
Dated	$\frac{1}{2}$
	Signature of a member or authorized representative of a member
	manuela Ceballos
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00