L16000105865

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D. SCOTT AUG 1 6 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: D&S Home Renovations LLC. 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:
Vance D. Felkel Name of Person
D&S Home Renovations LLC.
950 Lakehurst street
hakeland Flarida, 33805 City/State and Zip Code
derekt white tail @ amail, com E-mail address: (to be used for future armudi report notification)
For further information concerning this matter, please call:
Vance D. Fe (Ke) at (912) 481-4844 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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

(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L1600010.586.5</u>	y were filed on May 31, 2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address: 250 Lake	office address on our records, enter the name of the new re: Lakehurst st Enter Florida street address Aud Florida 33805 City Tip Code
N. D. A. D. A. D. G. W.	Cuy 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 added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Cammeron R. Claridy	5739 old Hwy 37 Lakeland, FL 33811	□ Add □ Remove
			□ Remove
		<u> </u>	Change
			Remove
			Change
			
			Change_
		·	Add.
			Remove
			Change
			□ Add □ Remove
			☐ Change

. If amending any other information, enter change(s) here: (Attach additional	· · · · · · · · · · · · · · · · · · ·
· Change busnes adress from	m: 5739 old Hwy
37 Lakeland, FL, 33811	,)
To: 950 Lakehurst st	
10. (DU LURE hurs)	
Lakeland FL, 33805	
	
	<u> </u>
	
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Effective date, if other than the date of filing: Aug. 18, 2017 (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	(optional) than 90 days after filing.) Pursuant to 605.0207 (3) equirements, this date will not be listed as the
the record specifies a delayed effective date, but not an effective time). The 90th day after the record is filed.	e, at 12:01 a.m. on the earlier of:
Dated 8-10-2017 Voune D. Felhel	
Signature of a member or authorized representative of	a member
Vance D. Felkel Typed or printed name of signee	

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Filing Fee: \$25.00