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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS ACCOUNTING AND INCOME TAX SVCS CORP.

Account Number : I20060000141 Phone : (561)929-6899

Fax Number : (954)788-7400

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			_	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLORIDA HOME PRO INVESTMENTS, LLC

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Corporate Filing Menu

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COVER LETTER

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SUBJECT	FLORIDA	HOME PRO INVESTMENTS	, LLC	
Sebule	•	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please retur	m all correspo	ndence concerning this matter	to the following:	
		ANIBAL QUINTAO		
			Name of Person	
		EXPRESS ACCOUNTING	INCOME TAX SERVICE CORP	
			Firm/Company	
		3927 N FEDERAL HWY		
			Address	
		POMPANO BEACH, FL.	33064	
			City/State and Zip Code	
		anibalquintao@hotmail.com E-mail address: (i to be used for future annual report notif	fication)
For further	information c	oncerning this matter, please co	·	
ANIBAL (OATMIUÇ		954 788-7400	
	Name o	f Person	at (at Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount;	•	
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & 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 266) Executive Center Circle Tallahassee, FL 32301

H160002112183

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA HOME PRO INVESTMENTS, LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L16000135920	were filed on 07/19/2016	and assigned
This amendment is submitted to amend the following:		•
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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		nter_the_name_of_the_new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	aZip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as public to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is

Page 1 of 3

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
MGR	ANIBAL QUINTAO	4321 NW 9TH AVENUE #105	
		POMPANO BEACH, FL 33064	≅ Remove
		W	
MGR	THIAGO SANTOS	4321 NW 9TH AVENUE #105	= Add
		POMPANO BEACH, FL 33064	□ Remove
			□ Change
			□ Add
			Remove
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ted		Sign		ANIBAL	Quint	'AO	f a member	145811.000	ARY OF A	

Filing Fee: \$25.00