

**L16000138165**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**800293055728**

12/14/16--01009--003 \*\*25.00

FILED  
16 DEC 14 AM 10:12  
SCHOOL OF STATE  
TALLAHASSEE, FLORIDA

**T WASHINGTON**

**DEC 15 2016**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pro Visions Build and Remodel 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:

Daniel Koerner Sr.  
Name of Person

Pro Visions Build and Remodel LLC  
Firm/Company

12749 County Brook Lane  
Address

Tampa, FL 33625  
City/State and Zip Code

dkekshomeimprovements.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Koerner Sr. at (813) 631-0108  
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      ☐ \$55.00 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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Pro Visions Build and Remodel LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 22, 2016 and assigned Florida document number L16000138165.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_  
City 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 = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>        | <u>Address</u>         | <u>Type of Action</u>                   |
|--------------|--------------------|------------------------|---|
| MGR          | Daniel Koerner Sr. | 12749 Country Brook Ln | <input checked="" type="checkbox"/> Add |
|              |                    | Tampa, FL 33625        | <input type="checkbox"/> Remove         |
|              |                    |                        | <input type="checkbox"/> Change         |
|              |                    |                        | <input type="checkbox"/> Add            |
|              |                    |                        | <input type="checkbox"/> Remove         |
|              |                    |                        | <input type="checkbox"/> Change         |
|              |                    |                        | <input type="checkbox"/> Add            |
|              |                    |                        | <input type="checkbox"/> Remove         |
|              |                    |                        | <input type="checkbox"/> Change         |
|              |                    |                        | <input type="checkbox"/> Add            |
|              |                    |                        | <input type="checkbox"/> Remove         |
|              |                    |                        | <input type="checkbox"/> Change         |
|              |                    |                        | <input type="checkbox"/> Add            |
|              |                    |                        | <input type="checkbox"/> Remove         |
|              |                    |                        | <input type="checkbox"/> Change         |
|              |                    |                        | <input type="checkbox"/> Add            |
|              |                    |                        | <input type="checkbox"/> Remove         |
|              |                    |                        | <input type="checkbox"/> Change         |

FILED  
16 DEC 14 AM 10:12  
STATE OF FLORIDA  
TALLAHASSEE

10 OCT 14 AHU: 13  
COMMUNICATIONS SECTION  
ONTARIO

FILED  
16 DEC 14 AM 10:13  
FBI - TAMPA  
TAMPA, FLORIDA

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated Samuel Brouner Jr

Daniel Werner Sr.

Typed or printed name of signee