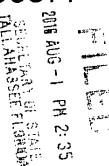
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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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COVER LETTER

	istration Section sion of Corporati	ons		
SUBJECT:	Gerrell	Remodeling	Company LLC ited Liability Company	
	,	Name of Lim	ited Liability Company	
The enclosed	Articles of Amend	dment and fee(s) are sub	omitted for filing.	
Please return	all correspondence	e concerning this matter	to the following:	
	_	Michael	Gerrell Name of Person	
		Gerrell	Remodeling Company Firm/Company	LLC
			Firm/Company	
		10800 kilen	Asc Way Address	
			Address	
		Tallahassee	FL 32307 City/State and Zip Code	
	_			
	·	Mikes sidin E-mail address: (oco e g mail · (om to be used for future annual report notific	cation
For further in	formation concern	ing this matter, please c		·
<u> </u>	ichgel Ger	re 11	at (<u>850</u>) <u>443 - 44</u> Area Code Daytime	<u>457</u>
	Name of Person	1	Area Code Daytime	Telephone Number
Enclosed is a	check for the follo	owing amount:		
□ \$25.00 Fi		330.00 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

	OF	
Gerrell Remode	bility Company as it now appears rida Limited Liability Company)	LC 37 C. A.C. On our records.
(A rior	ada Limited Ciability Company)	
The Articles of Organization for this Limited Liability	Company were filed on	7/25/16 and assigned
Florida document number 4 16000 1392 4	<u>3</u> .	
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	mited liability company her	<u>e</u> :
The new name must be distinguishable and contain the words "L	imited Liability Company," the de-	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reqregistered agent and/or the new registered office ac		our records, enter the name of the new
•		
Name of New Registered Agent:		
New Registered Office Address:		
·	Enter Flori	da 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 **Title Type of Action** <u>Name</u> **Address** Joshua J. Gerrell AMBR ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Add ☐ Remove ☐ Change

LITER	me 7/29/20	16 Gerrell	Remodeling	Canpany	LLC
has	two owner	rs. The	Owners are	Michael	I W.
Gerrel) and	Joshua J. G	Gerell.	Michael	W.
Gerrel			Gerrell 1		
LLC.	Joshva	J. Gerrell	owns 15	1. of G	errely
Remode	ling Comp	DRAY LLC.			
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	nserted in this block	te of filing: specific and cannot be priodoes not meet the applirtment of State's records	icable statutory filing	requirements, this	filing.) Pursuant to 60
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fective date is If the date in nent's effection	·	ffective date, but n			a.m. on the earl
ffective date is If the date is ment's effection cord speci-	fies a delayed ef after the record	ffective date, but no d is filed.	ot an effective ti		a.m. on the earl
ffective date is If the date is ment's effection ecord speci- e 90th day	fies a delayed ef after the record July 21 th	ffective date, but n	ot an effective ti	me, at 12:01 a	2018 AL SCUR TALLA

Page 3 of 3

Filing Fee: \$25.00