Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

)

Account Name : CAMACHO & ASSOCIATES LLC

Account Number : I20220000154 Phone : (323)453-5446

Fax Number : (407)350-5660

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

Email Address: = in PFLODECING & CHIMIL COM.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIM CUSTOM REMODELING LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

DEC 1 4 2022

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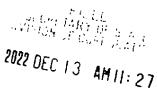
COVER LETTER

TO: Registration 5 Division of Co	Section orporations		
FIM CUS	TOM REMODELING LLC		
	Name of Lis	mited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	hada to ou	
r lease return an corresp	ondence concerning this matte	r to the following:	
	WILFREDO RAMOS		
		Name of Person	
	FIM CUSTOM REMODE	ELING LLC	
		Firm/Company	 _
	3831 CINNAMON FERN	L00?	
		Address	
	CLERMONT, FL 34714		
		City/State and Zip Code	<u> </u>
	fim.remodeling@gmail.com		
liar further information		to be used for future annual report noti	fication)
	concerning this matter, please c	all:	
WILFREDO RAMOS		407 690-4111 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	ha fallowing amount		
	_	- .	
■ \$25.00 Filing Fee	☐ S30.00 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 5		Street Address:	***
Division of C		Registration Sec Division of Corp	
P.O. Box 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



FIM CUSTOM REMODELING 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 ___04/03/2017 _____ and assigned Florida document number L17000073953 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 "LLC." 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 ___

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 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	<u>Name</u>	Address	Type of Action
AMBR	CEDENO LEON, VICTOR M.	17353 CAGAN CROSSINGS BLVD.	
		CLERMONT, FL 34714	
			🗆 Add
			□Remove
			□ Change
			CJAdd
			□Remove
			TChange
			ÜAdd
			□Remove
			Change
			-
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D. If amending any other information	WALL THE	EU Markan
D. If amending any other information, enter change(s) here: (Attach additional sheets, if	122 DEC 13	AMILERA
		
		
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E. Effective date, if other than the date of filing:	tionali	
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days an Note: If the date inserted in this block does not meet the applicable statutory filing requirements, to document's effective date on the Department of State's records.	er filing.) Pursua his date will no	int to 605.0207 (3)(it be listed as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: record is filed.	(b) The 90th (day after the
Dated DECEMBER 13 , 2022		
Signature of a member or authorized representative of a member		
		
WILFREDO RAMOS Typed or printed name of signee		