## 117000 110222

(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:





700323225737

01/22/19--01005--029 \*\*25.00

PRILED

19 JAN 22 PH 12: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O CHIDADNO

## **COVER LETTER**

	egistration Se ivision of Cor					
SUBJECT		Metro Property Inspectors, LLC				
SUBJECT	•	Name of Limited Liability Company				
The enclos	ed Articles of	Amendment and fec(s) are sub	mitted for filing.			
Please retu	rn ail correspo	ndence concerning this matter	to the following:			
		Windeliz Gohl				
			Name of Person			
		Metro Property Inspectors				
			Firm/Company	<del></del>		
		3906 Bellewater Blvd				
			Address	<del></del>		
		Riverview, FL 33578				
		windeliz.gohl@gmail.com	City/State and Zip Code	<del></del>		
		E-mail address: (	to be used for future annual report notif	ication)		
For further	information c	oncerning this matter, please ca	all:			
Windeliz (	Gohl		813 523-3907 at ( )			
	Name o	f Person		· Telephone Number		
Enclosed i	s a check for th	ne 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

Metro Property Inspectors, LLC		
(Name of the Limi	ted Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited L	iability Company were filed o	on 5/18/2017 and assigned
Florida document number L17000110222	·	
his amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability compa	<u>ny here</u> :
Metro Engineering & Inspections, LLC		<u>.</u>
The new name must be distinguishable and contain the v	vords "Limited Liability Company,"	'the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	1 S 16
Principal office address MUST BE A STREE	ET ADDRESS)	<u> </u>
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)	ED W D 20
B. If amending the registered agent and registered agent and/or the new registered o		ss on our records, enter the name of the
New Payintered Office Address	3906 Bellewater Blvd	
New Registered Office Address:	Ente	er Florida street address
	RIVERVIEW	, Florida <sup>33578</sup>
	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>	Address	Type of Action
		<u></u>	Remove
			Change
			1 SEE AND AND
			Add  Add  Reffieve  Reffieve  Reffieve  Add  Add  Add
			Thange
			Şiri <b>2</b> □ Add
			☐ Remove
		<del></del>	
			□ Remove
<del></del>		<del></del>	D Add
			□ Remove
			□ Add
			□ Remove

		<del> </del>
		<b>5</b>
		SA PO
		A P
		10 20 20 E
<del> </del>		
		<u> </u>
an effective date is listed, the date note: If the date inserted in this	iust be specific and cannot be prior to date of filii	(optional) ng or more than 90 days after filing.) Pursuant to 605.020 ry filing requirements, this date will not be listed a
e record specifies a delay The 90th day after the re		tive time, at 12:01 a.m. on the earlier o
ated	2019	
	11) in talia . H. l.O.	entative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00