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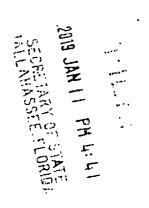
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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City P. L. MAC

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Div	ision of Cor	porations				
SUBJECT:		e Inspections, LLC				Z, .
SUBJECT.		Name of Lim	ited Liability Company			第二年 人
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.			A CONTRACTORISMENT
Please return	all correspo	indence concerning this matter	to the following:			
			Joe Lester			A STATE OF THE STA
			Name of Person			
			BAA Inspections LL	C		
			Firm/Company			
779 Brook Forest Court						
			Address			
			Apopka, FL 32712			
			City/State and Zip Code			
			candrene2004@yahoo.c			
		E-mail address: (to be used for future annua	report notific	cation)	
For further i	nformation c	oncerning this matter, please ca	all:			
Joe Lester			901 33	37-7872		
	Name o	f Person	Area Code	Daytime	Telephone Number	•
Enclosed is	a check for th	ne following amount:				
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$60.00 Filing Fe Certificate of St Certified Copy (additional copy is:	atus &
	Registr	ING ADDRESS: tation Section on of Corporations	Registra	T/COURIE		

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

AN	T	AMENDMENT	·
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AKI		ORGANIZATION	1 2 V 1
	0	r	TOO W
BAA Home Inspections LLC			records.) 7 and assigned
•	ited Liability Compa	ny as it now appears on our	records.)
\ <u></u>	(A Florida Limited I	ny as it now appears on our Liability Company)	
The Articles of Organization for this Limited I	iahilitu Campanu		7 and animal of
	лаонну Сопрану	were med on	and assigned
Florida document number L17000122383			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
BAA Inspections LLC			
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation	n "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		779 Brook Forest Court	
		Apopka, FL 32712	
Catanana and and if and inches		779 Brook Forest Court	
Enter new mailing address, if applicable:		Apopka, FL 32712	
(Mailing address MAY BE A POST OFFICE	E BOX)	747784 11 52712	
B. If amending the registered agent and	•		ecords, enter the name of the new
registered agent and/or the new registered of	office address ner	<u>e</u> :	
	D		
Name of New Registered Agent:	Renee Lester		
New Registered Office Address:	779 Brook For	est Court	
		Enter Florida stree	1 address
	Apopka		, Florida <u>32712</u>
		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>	Name	Address	Type of Action
			□ Remove
			☐ Change
			
			□ Remove
			☐ Change
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an effection in	e date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
	January 9th 2019
ated _	··
ated_	
ated_	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00