

(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



500303916145

09/28/17--01021--019 \*\*25.00

17 SEP 28 PM 2: 46

ED

## **COVER LETTER**

SUBJECT: Unlimited Improvement Sarvices 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:						
Migel BridgeWATER Name of Person Unlimited Improvement Services LLC						
Firm/Company						
1198 Village Forest PL						
Winter Park FL 32792 Migel Bridgewater						
Migel Bridgewater						
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
Migel Bridgewater at (407) 790 6846  Name of Person Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Scrifficate of Status S25.00 Filing Fee Scrifficate of Status Scrifficate of Status Scrifficate of Status Scriffied Copy (additional copy is enclosed)						

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

Unlimited Improveme	
(Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company vi Florida document number L 1 7 0 00 1645 40.  This amendment is submitted to amend the following:	were filed on
A. If amending name, <u>enter the new name of the limited liabil</u>	ility company hara
The new name must be distinguishable and contain the words "Limited Liability Contains the words "Liability Contains the words "	ity Company," the designation "LLC" or the abbreviation "L.E.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Winter Park 327925 6
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	2: 5
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	ē:
Name of New Registered Agent:	Bridzwater Hage Forest Place
New Registered Office Address: 198 V	Mage Forest Place
Winter	2 Park
Num Danistana d Amara Simulana (6 L. 1997)	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MOR	Migel Bridge	je Water 1198 Villag Winter Part	e. Forest Place Jado
			□ Remove
			🗀 Change
			□ Add
			□ Remove
		•	Change
<del></del>			□ Add
			□ Remove
			Olime SE T
			Change SEP 28 PH 2: 13
			□ Remove ?
			Change
	-		□ Add
			☐ Remove
		<del></del>	Change
		<del></del> .	□ Remove
		<del></del>	□ Change

	y other information, enter change(s) her	re: (Attach adattional sheets, tj	, .
·			
			<del></del>
			<del></del>
		<del>-</del>	<del></del>
		·	
		=	SEP 28
			P 28 P
<del></del>			P
	·		<u> </u>
			2: La
<del> </del>			
		. <u> </u>	
(If an effective date Note: If the date	Tother than the date of filing:  listed, the date must be specific and cannot be prior inserted in this block does not meet the applicative date on the Department of State's records.	r to date of filing or more than 90 days cable statutory filing requirements.	this date will not be listed as the
the record spe ) The 90th da	ifies a delayed effective date, but no after the record is filed.	ot an effective time, at 12:0	01 a.m. on the earlier of:
Dated	23 72017	<u>7</u> .	
	Signature of a member or autho	orized representative of a member	<del></del>
	Migel 6	Da, dyewate R	

Page 3 of 3

Filing Fee: \$25.00