

L17000197126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

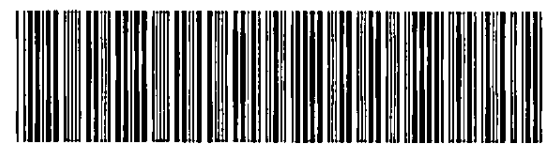
(Business Entity Name)

(Document Number)

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2017 DEC -3 6:07:49

DEC 1 9 2017
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Metropolitan Home Inspector
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:

Carmelo Coascut
Name of Person

Metropolitan Home Inspector
Firm/Company

5360 Olancha Road
Address

Ridge Manor, Florida 33523
City/State and Zip Code

mhomeinspector@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carmelo Coascut at (407) 361-2033
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2017

CARMELO CUASCUT
5360 OLANCHA ROAD
RIDGE MANOR, FL 33523

SUBJECT: METROPOLITAN HOME INSPECTOR LLC
Ref. Number: L17000197126

We have received your document for METROPOLITAN HOME INSPECTOR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 3 IS MISSING.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 117A00024063

2017 DEC -8 AM 12:43

117A00024063

2017 DEC -8 AM 7:43

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

Metropolitan Home Inspector

(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 Nov. 2, 2017 and assigned Florida document number 217000197126

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 "L.L.C." or the abbreviation "L.L.C."

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:

Marsha Coasut

New Registered Office Address:

5360 Olancha Rd.

Enter Florida street address

Ridge Manor.
City

Florida

33523
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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|----------------|---|---|
| MGR | Carmelo Cuasac | 5360 Olancho Rd Ridge Manor, Fl. 33523 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change |
| MGR | Marsha Cuasac | 5360 Olancho Rd Ridge Manor, Fl. 33523 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change |

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information, with a vertical line on the left side.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

12/4/17

Handwritten signature of Carmelo E. Cuasent

Signature of a member or authorized representative of a member

Carmelo E. Cuasent

Typed or printed name of signee

2017 DEC -8 AM 7:43