## 417000222842

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Enuty Name)				
<u></u>				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



500350736135

08/20/20--01010 -025 \*\*25.60

2620 AUS 20 - AH 11: 37

O SIMIVONS OCT 07 2020

## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations			
SUBJECT:	Fix to Flip				
SUBJECT:		Name of Lim	nited Liability Company	<u></u>	
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Joseph E. Seagle			
			Name of Person	·-··	<del></del> -
		Joseph E. Seagle, P.A.			
			Firm/Company	•••	
		924 W Colonial Dr			
			Address	*	
		Orlando, FL 32804			
			City/State and Zip Code		
		gregbond7@me.com			
Coe firethir in	Cornation a	E-mail address: ( oncerning this matter, please c	to be used for future annual re	eport notification)	
		succerning this matter, prease c			
Joseph E Sea				-7451	
	Name of	Person	Area Code	Daytime Telepho	one Number
Enclosed is a	check for th	e following amount:			
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Ado			
Registration Section Division of Corporations		_	Registration Section Division of Corporations		
	Box 632			The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N.	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 AUG 20 AH H: 37

	remotion 50 HULL: 31
Fix to Flip LLC	
( <u>Same of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)
he Articles of Organization for this Limited Liability Company	were filed on October 27, 2017 and assigned
orida document number L17000222842	
nis amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	ility company here:
enovation 320 LLC	
ne new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	113 Candace Dr. Stel
rincipal office address MUST BE A STREET ADDRESS)	113 Candace Dr. Stel Maitland, FL 3.751
nter new mailing address, if applicable:	
failing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registe</u>
Service and the service and th	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida \_

Zip Code

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

2020 At

		ZEZD AUG 20 - AH 11: 37	
<u>Title</u>	Name	Address	Type of Action
	·		□Add
			□Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	🗆 Add
			□Remove
			Change
			□Add
			Remove
		<del></del>	□ Change
			□ Add
			□Remove
			□Change
			□ Add
		<u> </u>	□Remove
			□Change
			🗆 Add
			□Remove
			□ Change

·	2020 81:0 00
	2020 AUG 20 AHTH: 37
Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and canno Note: If the date inserted in this block dose not must the	ot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 me applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department of State's	records
state s	records.
he record specifies a delayed effective date, but not an eff	fective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ord is filed.	
Durad June 12 202	20
Dated June 12	
Jergon VI-	
Signature of a membe	er or authorized representative of a member
Gregory S. Bond, Manager	
Турес	d or printed name of signee

Filing Fee: \$25.00