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S. YOUNG

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: <u>ITG</u>	HOME IMPROV Name of Lim	EMENT LLC ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	SAINDRA	L KING Name of Person	···
	ITG HOM	E IMPROVEME Firm/Company	ENT , LLC
	2601 GU	LF DR V # 7	219
	BRADEN	TON BEACH FO	- 34217
	FRANKE	ENKINGILE G-M to be used for future annual report not	ATL.COM
For further information co	ncerning this matter, please ca		
SANDRA Name of	Person	at (<u>239</u>) <u>896 –</u> Area Code Daytim	3867 ne Telephone Number
Enclosed is a check for the	e 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 S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TIG HOME IMPROVEMENT LLC (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 NOVEMBER 1 2011 and assigned Florida document number <u>L 11000130117</u> .
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 "LLC" or the breviation "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: SANDRA L KING
Name of New Registered Agent: New Registered Office Address: 2601 GULF DR N. # 219 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.

f Changing/Registered Agent, Signature of New Registered Agent

BRADENTON BEACH Florida 34217

Zin 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SANDRA L KING	2601 GULF OR N	ISAdd
		# 219	□Remove
		BRADENTON BEACH, FL 34	<u>Li]</u> □Change
MGR	SEEPHANIE S SMETH	1310 16TH AVENUE NU	□Add
	BRADENION FL 34209	Kemove	
		□Change	
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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		 	□Remove
			☐ Change

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ective	e date, if other than the date of filing: <u>JANVORY 12.2020</u> (optional) ive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
<u>te:</u> If	t's effective date on the Department of State's records.
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