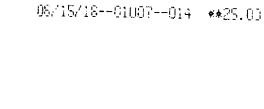
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COVER LETTER

TO:

TO:	Registra Division				
SUBJI	ECT:]	<u>Au</u>	About U	Remodeling and Off. Limited Liability Company	Parers, LLC
The en	nclosed Arti	cles of A	mendment and fee(s) a	re submitted for filing.	
Please	return all co	orrespond	dence concerning this n	natter to the following:	
				yne Baker Name of Person It U Lemodelin Firm/Company	ig and Parers, LC
			3110	Arch Court	
			Set all_about_L	City/State and Zip Code L_remodeling - Petro lress: (to be used for future annual repor	rs Quahro.com
For fu	rther inform	ation cor	ncerning this matter, plo		
	_ <u>₩</u> a	47U Name of I	Bakev Person	at (SG) — 20 Area Code — Da	53 7477 nytime Telephone Number
Enclos	sed is a chec	k for the	following amount:		
S \$2	5.00 Filing	Fee	□ \$30.00 Filing Fee & Certificate of Stat		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		Registrat Division P.O. Box	GADDRESS: ion Section of Corporations : 6327 see, FL 32314	Registration S Division of Co Clifton Buildi	orporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability)	Company as it dow appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number <u>U805009106</u>	mpany were filed on 10008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and contain the words "Limite Enter new principal offices address, if applicable:	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST <u>BE A</u> STREET ADDRE	SSS) 88 \$\leq \sqrt{\sq}}\sqrt{\sq}}}}}}}}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ECRETARY OF STATE SION OF CORPORATIONS AUG 15 PM 2: 56
B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre	red office address on our records, <u>enter the name of the new ss here</u> :
Name of New Registered Agent:	Wayne Baker
New Registered Office Address:	Emer Florida street address Sching Florida 33870 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.

f Changing Begistered Agent, <u>Signature of New Registered Agent</u>

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Wayne Baker	3110 Avery Court	\
	5	Sebring, Fr. 33870	□ Remove
			⊡ Change
AMBR_	Jamie Boyd	453 Oak Avenue	
		453 Cak Avenue Sebring Fr 33870	□ Remove
			De hange
			□ Remove
			Change
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(If an effective da Note: If the da	e, if other than the te is listed, the date me ate inserted in this b fective date on the l	st be specific a lock does not	nd cannot be p meet the ap	plicable statu			ial) ling.) Pursuant to 60.	5.020
	pecifies a delayed day after the rec			not an eff	ective time,	at 12:01 a.	ກ. on the earli	ier d
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Filing Fee: \$25.00