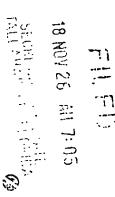
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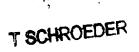
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COVER LETTER

TO: Registration Se Division of Cor					
JUNIOR P	RO REMODELING, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	GLAUCIA BASTOS				
THE TRUST CIRCLE SERVICES, LLC Firm/Company					
	THE TRUST CIRCLE SE	ERVICES, LLC			
		Firm/Company			
	1001 EAST SAMPE RO	-			
		Address	· · · · · · · · · · · · · · · · · · ·		
	POMPANO BEACH FLO	DRIDA 33064			
	City/State and Zip Code				
	-		 		
			icanioni		
THE TRUST CIRCLE SERVICES, LLC Firm/Company 1001 EAST SAMPE ROAD 10E Address POMPANO BEACH FLORIDA 33064 City/State and Zip Code ATENDIMENTO@THETRUSTCIRCLE.INFO E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: BLAUCIA BASTOS 954 245-9123 at (
GLAUCIA BASTOS					
Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25,00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUNIOR PRO REMODELING, LLC			
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our record (Limited Liability Company)	<u>s.</u>)	
the Articles of Organization for this Limited Liability Colorida document number L18000044823	ompany were filed on 02/19/2018	and assigned	
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limit	ited liability company here:		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "ELC	• • • • • • • • • • • • • • • • • • • •	
ater new principal offices address, if applicable:		:: 50	
Principal office address MUST BE A STREET ADDR	RESS)	10 V9 15	
		2 0	
nter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)		20 A A A A A A A A A A A A A A A A A A A	
		Ø .	
3. If amending the registered agent and/or regis egistered agent and/or the new registered office add Name of New Registered Agent:		s, enter the name of the	
New Registered Office Address:			
	Enter Florida street addres	5	
	, Flo	orida Zip Code	
	\$ 115	7.1f : \ C/C/C	

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>	Address	Type of Action
MGR	Edmilson Rodrigues da Cunha J	10147 Boca Entrada Blvd 104	
		Boca Raton, FI 33064	■ Remove
			☐ Change
MGR	Erica Vicente R de Sousa	10147 Boca Entrada Blvd 104	■ Add
		Boca Raton, FI 33428	□ Remove
			Change
			□ Add
			Remove O No To Change
			Add T
			Add
			☐ Remove
			Change
			□ Remove
			☐ Change

			
			
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		8	σ,
Tective date, if other than the date of filing:		(optional)	
ote: If the date inserted in this block does not meet the applica	to date of filing or more that the statutory filing requ	an 90 days after filing.) Purs airements, this date will (mant to 605.026 not-be listed (
ocument's effective date on the Department of State's records.			
e record specifies a delayed effective date, but not	an effective time	at 12:01 a.m. on t	he earlier
The 90th day after the record is filed.	i dir ciracira cirra,	00 12.01 a o c	THE CENTRE!
November 10th 2018			
ated	•		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00