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

Office Use Only



200330486362

06/07/19--01005--007 **30.00

T GLASS JUN 07 2019

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: (V)	·	A RBLEWORKS (ited Liability Company	LC_		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Roger	D. CHRISTIAN Name of Person		2019 JU SEON	
		Firm/Company		FILED 019 JUN - 7 AHII: 4 SEORIA DE JOSEA MILARES DE JOSEA	
	0000	YELLOW MOON Address	D1~;		
	TALLA	HASSEE FL. City/State and Zip Code ece marble remo to be used for future annual report notifi	32312	. 1	
	Masterpi E-mail address: (<u>ece marble, remo</u> to be used for future annual report notifi	deling (a)	gmail.com	~
For further information co	oncerning this matter, please ca				
Roger D.,	Person	at (850) 264 Area Code Daytime	-0848 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)	S60.00 Filing Certificate of Certified Co (additional co)	of Status &	

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 Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MASTERPIECE MARBU	eworks LLC
(Name of the Limited Liability Company (A Florida Limited Lia	v as it now appears on our records.)
·	07/05/- 11
The Articles of Organization for this Limited Liability Company w	vere filed on US/05/2018 and assigned
Florida document number LI 8000054 22	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ity company here:
MASTERPIECE REMODELING I	Li C
The new name must be distinguishable and contain the words "Limited Liability	•
Enter new principal offices address, if applicable:	8000 YELLOW MOON DR.
(Principal office address MUST BE A STREET ADDRESS)	TALLAHASSEE, FL 32312
	201
	Supplied to the supplied to th
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	7
7	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	
Name of New Registered Agent: Kog 6	YELLOW MOON DR.
New Registered Office Address: 8000	YEURAL MARN DE.
New Registered Office Address.	Enter Florida street address
TAUAI	City Florida 323 12 Zip Code
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am familiar with and covided for in Chapter 605, F.S. Or, if this document is

Page 1 of 3

If Changing Heghtered Agent, Signature of New Registered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** ROBERT LIFORD JR 8000 YEROW MOON DR: __ Add TALLAHASSEE FL 32312 BRemove _ Change □ Add _□ Remove ☐ Change _□ Remove __ Change □ Add ☐ Remove ☐ Change _□ Add ☐ Remove ____ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

_				· · · · · · · · · · · · · · · · · · ·						
_										
										
									·	
		_						,		
							<u> </u>			
										
_		.							2019	
									<u></u>	FILED
_								- : 5 -	<u> </u>	
_									3	0
									=	
						· • •			Ŧ	
_							· · ·			
										
f an effec <u>Note:</u> I	e date, if other ctive date is listed f the date insertent's effective date.	, the date must be ed in this block	specific and c does not me	annot be prior to et the applica	o date of filing	or more than 90 filing requiren	(option days after fil tents, this d	ing.) Pursua	int to 605. It be liste	.0207 ed as
e reco	ord specifies 90th day afte	a delayed ef er the record	fective da is filed.	te, but not	: an effectiv	ve time, at	12:01 a.r	n. on the	e earlie	er of:
Dated _	1 JUNI	€ 7,20 Z.,1)[19 - 19							
			Jan	1	rized represents RISTI d name of signe	ntive of a memb				

Page 3 of 3

Filing Fee: \$25.00