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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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Name Change

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COVER LETTER

	egistration Se ivision of Cor					
SUBJECT		AL FRAMING, DRYWALL	AND CLEANING SVC LLC			
SOBJECI	· •	Name of Lim	ted Liability Company			
The enclos	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please retu	rn all correspo	ndence concerning this matter	to the following:			
		NICHOLAS FANELLA				
		NR FANELLA & CO	Name of Person			
		434 TANGLEWOOD DR	Firm/Company			
		FORT WALTON BEACH	Address FL 32547			
		NFANELLA@COX.NET	City/State and Zip Code		ij	Ž.
			o be used for future annual report notific	ation)	139 (
For further	information c	oncerning this matter, please ca	ıll:		 ານ ໝ	12572
NICK FA	NELLA		850 862-7131 at ()		<u> </u>	
	Name o	f Person	Area Code Daytime	Telephone Number		STATE
Enclosed i	s a check for th	ne following amount:				湯
= \$25.0f	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 \$t Certified Copy (additional copy is a	tatus &	

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

R & L METAL FRAMING, DRYWALL AND CLEANING SVC 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 Lia	ıbility Company y	were filed on 10/15/	2018	and assi	ened
Florida document number L18000242503					D •
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited liabil	lity company here:			
INSPIRATION R & L LLC					
The new name must be distinguishable and contain the wor	rds "Limited Liabili	ty Company," the desig	nation "LLC" or the ab	breviation "11	C."
Enter new principal offices address, if applical	ble:				
(Principal office address MUST BE A STREET	(ADDRESS)				
				19	
				000	- : -
Enter new mailing address, if applicable:				35	
(Mailing address MAY BE A POST OFFICE B	8 <i>0X</i>)	· · ·			
				් *	4,46
B. If amending the registered agent and/or registered agent and/or the new registered offi			ır records, <u>enter</u>	the name (
Name of New Registered Agent:					
New Registered Office Address:					
	 	Enter Florida	street address		
			Florida		
		City		Zip Code	
New Registered Agent's Signature, if changing Re	egistered Agent:				
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this content.	r and complete p tered agent as pr egistered office o	performance of my rovided for in Cha	duties, and I am j pter 605, F.S. Or,	familiar with if this docu	and nent is

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			Remove
			□ Change
			Add
			Remove
			□ Change
			Add
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f an ef <u>Note:</u>	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
اد. اما	OCTOBER 23, 2019
Dated	
	~ 1 / 1 / N / N / N

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00