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(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to F	iling Officer:	
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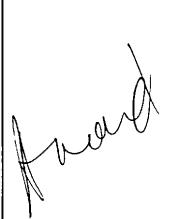


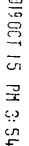


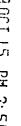
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COVER LETTER

Division of Corpora	tions		
SUBJECT: Pytho	n Home In	Spection 40	
The enclosed Articles of Ame	ndment and fee(s) are sub-	mitted for filing.	
Please return all corresponden	ce concerning this matter	to the following:	
- -		Name of Person ME INSPECTION OF Firm/Company Address	
		34119 City/State and Zip Code HON HOMEINSPECTION to be used for future annual report notifi	cation)
For further information concer	ming this matter, please ca	ill:	
BRETT M. ONAS	ict	at (<u>239</u>) <u>431-5</u> Area Code Daytime	100
Name of Pers	on	Area Code Daytime	Telephone Number
Enclosed is a check for the fol	lowing amount:		
⊠ \$25.00 Filing Fee □	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Homo Tocosti a ///

14 won (10 me LI)	Specifical CCC
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Labdity Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>£ 1900006460</u> .	y were filed on January 4th 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
Python Home Inspection LL The new name must be distinguishable and contain the words "Limited Liab	.C
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2931 Pine Run Rd 201
(Principal office address MUST BE A STREET ADDRESS)	4.4
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6017 Pine Ridge Rd #104 NAPLES, FC 34119
registered agent and/or the new registered office address he	-
New Registered Office Address: 6017	Enter Florida street address
NAPL	ES Florida $\frac{39/19}{\text{City}}$ Florida $\frac{39/19}{\text{Zip Code}}$
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>

PJ

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 fighiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Prif this document is being filed to merely reflect a change in the registered office address. I bereby 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> Name **Address** Type of Action MGR Yalemis Martin 6017 Pine Ridge Road \$104 DAdd Naples, FL 34/19 Remove _____ Change 6017 PINE Ridge Rd # 104 FAdd BRETT M. ONASCH MGR NAPLES, FL 34119

Remove ☐ Change 6017 PENE Ridge Rd# 104 DANGE AMBR BRETT M. ONASCH NAPLES FL 34117 - Remove ☐ Change PALEMES Martin 6017 Pine Ridge Rd #104 DAdd AMBR NAPLES, EL 34119 ☐ Change □ Add ☐ Change

□ Remove

_□ Change

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e date, if other than the date of filing: Oct	ober 1st 2019 (optional)
tive 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 60
the date inserted in this block does not meet the ap it's effective date on the Department of State's reco	oplicable statutory filing requirements, this date will not be lisords.
rd specifies a delayed effective date, but	t not an effective time, at 12:01 a.m. on the earl
Oth day after the record is filed.	
October 1st 2019	, /////////////////////////////////////
)ctober 1 2019	
- Valenit (Wath Kinh
Signature of a member or	authorized representative of a member
Signature of a member or Yalemis Martin	BRETT M. ONASCH
	1 1 0 c c c c c c c c c c c c c c c c c

State of Florida
County of Collier
Signed and sworn to (or affirmed) before me on
O-11-2021 By Yalemis Martin 1 Brett of Filing Fee: \$25.00
Notary Public

