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Certified Copies	Certificates of	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO:				
CHRIC		en & Bath ,LLC		
SUBJE		Name of Lim	ited Liability Company	
The end	closed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	eturn all correspo	ndence concerning this matter	to the following:	
		Amendment and feets) are submitted for filing. Amendment and feets) are submitted for filing. Indence concerning this matter to the following: Antonio J Garcia Name of Person Firm/Company 4750 Via Carmen Address Naples, FL 34105 City/State and Zip Code ajgnaples@yahoo.com E-mail address: (to be used for future annual report notification) oncerning this matter, please call: [Person at (239) 692-4860] Area Code Daytime Telephone Number		
	AGM Kitchen & Bath .L.C Name of Limited Liability Company			
			Firm/Company	
		4750 Via Carmen		<u>.</u>
			Address	
		Naples, FL 34105		
		ajgnaples@yahoo.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	cation)
For fur	her information co	oncerning this matter, please co	all:	
Ant	onio J Garcia		at (
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$25	5.00 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

AGM Kitchen & Bath ,LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on01/07/2019	and assigned
lorida document numberL19000008779		
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	oility company here:	
AGM Kitchen & Bath, LLC		
he new name must be distinguishable and contain the words "Limited Liabi	ility Company." the designation "LL	C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		9
		FEB F
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nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		G: 9
,		23
		- }-
3. If amending the registered agent and/or registered o	office address on our record	is, <u>enter the name of the r</u>
egistered agent and/or the new registered office address her	<u>·e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ASS
	, F	lorida
	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.

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
AMBR	Fredy J Gomez Cardenas	10595 Noahs Circle, Apt 417 Naples, FL 34116-8342	
			☐ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
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ote: If the o	te, if other than the da ate is listed, the date must be date inserted in this block ffective date on the Depa	does not meet t	the applicable	ate of filing or mo	(opt te than 90 days after requirements, th	ional) er filing.) Pursuant to is date will not be	605.0207 listed as
	pecifies a delayed e day after the record		, but not a	n effective tir	ne, at 12:01	a.m. on the ea	arlier of
ated	February 4	20	119				
<u>-</u> -		./D	<u></u>				
		/= 1/1					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00