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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : THE FARR LAW FIRM

Account Number : 103654001666 Phone : (941)639-1158

Fax Number : (941)639-0028

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: ANDY. CARRIER @ HOMEVESTOR S.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TIMELY RENOVATIONS LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Timely Renovations, LLC		
(Name of the Limited Liability C (A Florida Lur	ompany as it now appears on our records.) nited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Comp.  Florida document number <u>L19000023400</u>	pany were filed on January 22, 2019	and assigned
riorida document number		
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	
		爱说 鼍 一
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		S 5 0
		1 2 1
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, <u>ent</u> here:	er the name of the new
		<u> </u>
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida street address	
<u> </u>	, Florida	
	Clip	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
MGR	CARRIER, ANDREW	4100 PLATT ST NORTHPORT, FL 34286	☐ Adıl
		<del></del>	🖂 Remove
N4CD		1130 JAMAICA RD	■ Change
MGR SPEAKER, MATTHEW	SPEAKER, MATTHEW	VENICE, FL 34293	D A¢d
		□ Remove	
			□ Remove
			Charge
			Ghange
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			□ Кеточе
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. If amending any other in	information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Effective date, if other the (If an effective date is listed, the Note: If the date inserted in document's effective date of	than the date of filing:  e date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 in this block does not meet the applicable statutory filing requirements, this date will not be list on the Department of State's records.	:5.0207 (3)(b) :ted as the
the record specifies a c ) The 90th day after t	delayed effective date, but not an effective time, at $12:01\ \mathrm{s.m.}$ on the earlithe record is filed.	ier of:
Dated March 21	(1) (2019)	
<del></del>	Signature of a uterober or authorized representative of a member-	
Andrew Carrior		
	Typed or printed name of signee	

Page 3 of 3

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