## L190000 55117

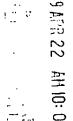
(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		-

Office Use Only

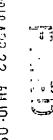


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U4/22/19--01017--027 \*\*25.00



R. WHITE APR 2 9 2019



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: V HYRRICANE RESISTANT BUILDERS  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CARLOS BELLINA Name of Person
V HULLICANE RESISTANT BUILDERS. Firm/Company
18571 NW 53 ME
City/State and Zip Code  CANUS DELLINA CITOT MILL COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tose ZAPATA at (786) 314. 4848  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status & Certificate of St

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 ARTICLES OF ORGANIZATION [1]



2019 APR 22 AM 10: 09

V HARAICANE RESISMNT	BUILDERS LICE
V HUNDICANE NESISMAT (Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 19000055117</u> .	were filed on 02 · 25 · 19 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited lial</u>	
The new name must be distinguishable and contain the words "Limited Liab	
Enter new principal offices address, if applicable:	KIMMI GARDENS FC 33055
(Principal office address MUST BE A STREET ADDRESS)	KIMMI GARDENS, FL 33055
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAUL AS ABOUE
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the new</u> re:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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>	<u>Address</u>	Type of Action
MGR	CARlOS BELLINA	18571 NW BONAVE MINHI GARDEN, FC 3305T	Add
			Remove
			Change
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
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	<del></del>		🗖 Add
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			Change
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			□ Remove
			Change

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(If an effecti Note: If t	date, if other than the date of filing: APUL 11, 2019 (optional) we 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a 's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
	Oth day after the record is filed.
) The 90	
) The 90	Oth day after the record is filed.

Page 3 of 3

Filing Fee: \$25.00