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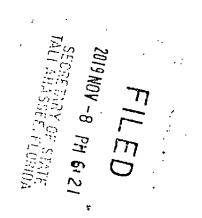
(Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone i	(#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:	Registration S Division of Co			
SUBJ	ECT:	360 Remodel Name of	and Repair, LLC Limited Liability Company	
The e	nclosed Articles of	of Amendment and fee(s) are	submitted for filing.	
Please	e return all corresp	pondence concerning this ma	atter to the following:	
		Lya	nne Santiago Name of Person	
		360	Remodel and Repa	ir, LCC
		1703 E.	Jersey Aue Address	
			ando, FL 32806 City/State and Zip Code 2 204 @ yahoo. com sss: (to be used for fluture annual report noti	
For fu	rther information	concerning this matter, plea	se call:	
	Lyanne Name	Santiago of Person	at (407) 361-7 Area Code Daytim	401 e Telephone Number
Enclos	sed is a check for	the following amount:		
≽ i \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Statu	S S S S S S S S S S S S S S S S S S S	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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

Construction	and Remodeling P	ros, LLC	
(Name of the Limited)	Liability Company as it now appears (Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabi		2/26/2019	and assigned
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company here	: :	
360 Remodel av The new name must be distinguishable and contain the word	nd Repair, LLC.		
The new name must be distinguishable and contain the word	s "Limited Liability Company," the desi	ignation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applicabl	e: 1703 E	Jersey Ave	
Enter new principal offices address, if applicabl (<u>Principal office address MUST BE A STREET A</u>	ADDRESS) Orlando	FL 32806	
Enter new mailing address, if applicable:	1703 E	Jersey Av	'e
(Mailing address MAY BE A POST OFFICE BO	w Orlando	FL 32806	·
B. If amending the registered agent and/or registered agent and/or the new registered office	address hare:	C.º ~√.	name of the nev
Name of New Registered Agent:	Lyanne Sar 1703 E. Jersey Enter Florida	tiago Fis	± 1∏ ± 0
New Registered Office Address:	1703 E. Jersey Enter Florid	A VC 5.77 -	
	Orlando	Florida 32	806
_	City		Zip Code
Non Domintound Apostic Cimerana if the air Dom	Internal Arrest		

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
	Carmen M. Cabranes	1703 E. Jersey Ave Orlando, Fc. 326	
		Carmen M. Cabranes	Remove
			Change
			🗆 Add
			Remove
			□ Change
			□ Add
			Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			□ Add
			□ Remove
			Change

D. If antending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated November 4, 2019 Signature of a member or authorized representative of a member
Lyanne Santiago Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00