L19000111935

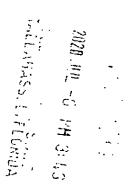
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600347182256

07/06/20--01015--003 **39.00



8/8/20

COVER LETTER

TO: Registration Section

Division of Cor	porations		
Luxury Sci SUBJECT:	reen Enclosures LLC		
	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Walter Antonio Hernade	z Lopez	
		Name of Person	
		Fim√Company	
	5206 WARREN ST		2020 11.1 - 12
		Address	
	Naples, FL 34113		
		City/State and Zip Code	
	lsenclosures@gmail.com		3-1
	E-mail address: (to be used for future annual report no	otification)
For further information c	oncerning this matter, please c	all:	
Santiago Roblero		239 963-7802	
Name o	f Person		me Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 17	Street Address: Registration S Division of Co The Centre of 2415 N. Mont Tallahassee, F	orporations Tallahassee roe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUXURY SCREEN ENCLOSURES LLC	C	
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our recordida Limited Liability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited Liability	Company were filed on 04/24/2019	and assigned
lorida document number L19000111935		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the li	mited liability company here:	
HAMAR CONSTRUCTION LLC		-: 25
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LI	.C" or the abbreviation "L.I.,C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADI	DRESS)	<u> </u>
		ب ب
Enter new mailing address, if applicable:		£ : 5.
Mailing address MAY BE A POST OFFICE BOX)		•
	-	· ·
3. If amending the registered agent and/or register		r the name of the new registe
gent and/or the new registered office address here	:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
	, F	Florida
	City	Zıp 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 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
			□Add
			□Remove
		-	□Change
			□Add
			□Remove
			FD Change
			□ Add
			☐Remove
			☐Change
			□Remove
			Change
		······································	□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
			□Remove
			☐ Change

-	
	. 얼
ective	date, if other than the date of filing: (optional)
n effecti <u>te:</u> If t	re 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' he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a seffective date on the Department of State's records.
ecord sp is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	7/2/2020
ted	
ted	Signature of a member or authorized representative of a member

Filing Fee: \$25.00