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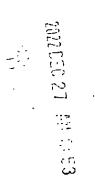
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COVER LETTER

Registration Section
Division of Corporations

TO:

	IMPROVEMENTS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	YADIRA RIVERA		
		Name of Person	
		Firm/Company	
	330 TRAVELERS CREEF	CDR	
	· · ·	Address	
	AUBURNDALE, FL. 338	223	Z022 (
		City/State and Zip Code	2022 (EC 27
	E-mail address: (to be used for future annual report notifical	tion)
For further information c	oncerning this matter, please c	all:	.: n
YADIRA RIVERA		at (<u>407</u>) <u>676 -</u> Area Code Daytime Te	0837
Name o	f Person	Area Code Daytime Te	elephone Number
Enclosed is a check for th	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	Section Corporations	Street Address: Registration Section Division of Corporation The Centre of Tall	rations
Tallahassee, l		2415 N. Monroe S	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DI HOME IMPROVEMENTS LLO	•		
(Name of the Limi	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on 06/	04/2019 a	nd assigned
Florida document number L19000148723			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the abbrevial	ion "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE.	ET ADDRESS)		
	·		~
			22 E E E E E E E E E E E E E E E E E E
Enter new mailing address, if applicable:		<u> </u>	- iú
Mailing address MAY BE A POST OFFICE	E BOX)		. 12
			*
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our r	ecords, <u>enter the name of t</u>	
igent and of the new registered office addri	es nere.		10
Name of New Registered Agent:	YADIRA RIVERA		
New Registered Office Address:	330 TRAVELERS CREEK DR		
	Enter Flor	rida street address	
	AUBURNDALE	, Florida 33823	

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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 J. MERCADO	330 TRAVELERS CREEK DR	□ Add
		AUBURNDALE, FL. 33823	■ Remove
			□Change
AMBR	YADIRA RIVERA	330 TRAVELERS CREEK DR	
		AUBURNDALE, FL. 33823	Remove
			■Change
			ZZO Add
			Remove
			Change C⊓ N □ Add
			□Remove
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			□Remove
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			□Change

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			27
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Note: If the date inserted in this b		(optional) filing or more than 90 days after filing tory filing requirements, this date	
record specifies a delayed effecti I is filed.	ve date, but not an effective time, at 12	:01 a.m. on the earlier of: (b) Ti	he 90th day after the
Dated	2022		
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