# L19000182012

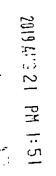
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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U8/21/19--01006--021 \*\*25.00



### **COVER LETTER**

TO: Registration Section Division of Corpora			
SUBJECT: The	Salty Hamm Name of Limite	er Home Re	epair_
The enclosed Articles of Ame			
-	Michelle	Perkins Name of Person	
-			ome Repair ILC
	1525 bot	h St. E	
_		FL 34 6 City/State and Zip Code	
_	E-mail address: (to	- m perking be used for future annual re	51323 Cgmail eport notification)
For further information conce	erning this matter, please cal	II:	
Michelle P.	erkin	at ( 941 )	Daytime Telephone Number
Enclosed is a check for the fo		☐ \$55.00 Filing Fee &	
<b>四</b> \$25.00 raing ree €	Certificate of Status	Certified Copy (additional copy is encl	Certificate of Status &

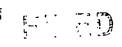
MAILING ADDRESS:

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 FOR TO OF



# 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>	Name	Address	Type of Action
<u>ambr</u>	Michelle Perkins		Add
<u></u>		1525 60th St. E Bradewon FL 3	,420 € Ø Remove
<u>mgr</u>	Mo Michelle Perkins	1505 Looth St & Bradewon Fl 34	□ Change   20
			□ Remove
ambe	Manuel C. Gibson Jr.	1525 60th St & Bradeston, Fl	
			☐ Remove
			Change
			Remove
			Remove
			Change
			🗆 Remove
			Change

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-	
N'atai It	date, if other than the date of filing:  1/9/19  (optional)  ive 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 t's effective date on the Department of State's records.
b) The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
Dated	8 19 3019
	8 19 3019  ———————————————————————————————————
	Michelle Perklens  Typed or printed name of signee

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Filing Fee: \$25.00