

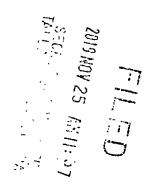
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## **COVER LETTER**

ro;	Registration Sec Division of Corp				
		Hart Construction and Remode	ling, LLC		
Name of Limited Liability Company					
The enc	dosed Articles of .	Amendment and fee(s) are subi	nitted for filing.		
<sup>a</sup> lease r	return all correspo	ndence concerning this matter t	o the following:		
		Matthew T. Harrod			
			Name of Person	.,	
		Harrod Law, PLLC			
			Firm/Company	•	
		822 A1A North, Suite 310			
			Address		
		Ponte Vedra Beach, FL 320	082		
			City/State and Zip Code		
		mharrod@mattharrod.com	to be used for future annual report notific	enticall)	
For fur	ther information c	oncerning this matter, please co		CARONI)	
Matthe	ew T. Harrod		904 607-4995 at ()		
	Name o	f Person	at () Area Code Day time	Lelephone Number	
Enclos	ed is a check for th	ne following amount:			
<b>≡</b> \$2:	5.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy (senclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

TO:

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

Hernandez-Hart Construction and Remodelia		
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our real Limited Liability.Company)	ecords.)
The Articles of Organization for this Limited Liability C	Company were filed on 7/22/2019	and assigned
Florida document number L19000187018		<u> </u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
Hernandez Hart Construction and Remodeling, LLC		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
		20 S.
		2 20 -
Enter new mailing address, if applicable:		2
(Mailing address MAY BE A POST OFFICE BOX)		O 1
	*****	All III
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	tered office address on our rec ress here:	ords, enter the name of the m
Name of New Registered Agent:		
New Registered Office Address:		
····	Enter Florida street ad	ldress
		, Florida
<del></del>	City	Zip Code
New Registered Agent's Signature of changing Registered	d 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
MGR	Rachel Elizabeth Hart	7803 Caymand Rd.	
		Jacksonville, FL 32216	Add
		Jacksonvine, PL 32210	Remove
			Change
			Add
			☐ Remove
			☐ Change
			☐ Remove
			Change
			□ Remove
		-	☐ Change
<b></b>			
			□ Remove
			☐ Change
<del></del>		-	CJ Add
			□ Remove
			Change

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ivie.	ive date, if other than the date of filing:
e red The	ford specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of $90$ th day after the record is filed.
ated	November 19 2019
	Signature of a member or authorized representative of a member
	•

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Filing Fee: \$25.00