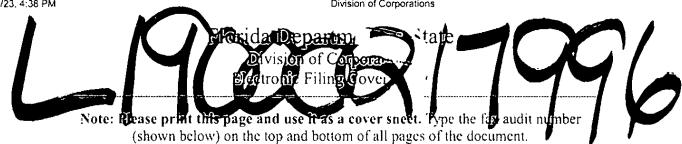
6/5/23, 4:38 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TIMELINE BUSINESS CENTER LLC

Account Number : I20150000034 Phone : (239)344-7417 Fax Number : (888)344-7262

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

diegocmiranda91@gmail.com Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARSENAL REMOVAL & INSTALLATION LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Help

10N - 6 2023 T. LEMIEUX 06/5/2023 · 13:52 PM

T0:18506176383 FROM:8883447262

Page: 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARSENAL REMOVAL & INSTALLATION LLC				
(<u>Name of the Limited Liability Con</u> (A Florida Limite	ipany as it now appears on our records.) d Liability Company)		_	
The Articles of Organization for this Limited Liability Compa	ny were filed on FLORIDA	and	Lassigne	ed
lorida document number L19000217996				
his amendment is submitted to amend the following:				
If amending name, enter the new name of the limited li	ability company here:			
RISE RENOVATIONS LLC				
he new name must be distinguishable and contain the words "Limited Lic	ibility Company," the designation "LLC" or the	abb:eviatio	ı "L.L.C.	
inter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)				
				 -
nter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
		-		
		· · ·	2023	
l. If amending the registered agent and/or registered offic	e address on our records, enter the na	me of the		gistei
gent and/or the new registered office address here:			:	
			Ś	-"-
Name of New Registered Agent:)***	(
No. Desistand Office Address		ب	<u>ت</u>	
New Registered Office Address:	Enter Florida street oddress		- 	

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 habitay company has been notified in writing of this change.

Circ

Florida_

06/5/2023: 13:52.PM T0:18506176383 FROM:8683447262

Page: 4

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

Title	Name	Address	Type of Action
			Add
			□Remove
			[Change
		ZAdd	
			□Remove
			Z Add
			□Remove
			Change
			Z Add
			[]Remove
			URemove
			Remove
			Change

ii amei	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
•	
_	
_	
_	
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_	
ti an che Note:	ve date, if other than the date of filing:
e record rd is fil	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 ed.
Dated	OG. O.2 2023 (Link: CX) Signature of a member or authorized representative of a member
	(fund)
	Signature of a member or authorized representative of a member
	DIEGO CAMARGO MIRANDA

Filing Fee: \$25.00