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Office Use Only

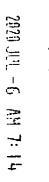


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AUG 1 5 2020 S. YOUNG

COVER LETTER

Division of Corporations HG GREAT HOME REMODELING LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: EXCEGLY VICDALLY HERRERA SALAZAR Name of Person Firm/Company 1453 MARTINIQUE CT APT 6406 Address WESTON/FLORIDA/33326 City/State and Zip Code carlosisturiz@gmail.com E-mail address; (to be used for future annual report notification) For further information concerning this matter, please call: EXCEGLY HERRERA 4966112 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed). (additional copy is enclosed) Mailing Address: Street Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIG GIZBAT UOME IZEMODEEU	VG 1717C		
(Name of the Lim	ted Liability Comp	iny as it now appears on our re Liability Company)	cords.)
	TA Florida Limited	Liab(IIIy Company)	٠
The Articles of Organization for this Limited I	iability Company.	were filed on 02/17/2020	and assigned \
Florida document number L20000053643			
rionda document fidinoci	·		فوره بالمستقبل المستقبل المستق
This amendment is submitted to amend the fol	lowing:		,
	•		, <u> </u>
A. If amending name, enter the new name of	of the limited lial	<u>ility company here</u> :	
N/A			
The new name must be distinguishable and contain the	words "Limited Ligh	Dity Company "the designation"	1.1.C" or the abbreviation "1.1.C."
The new mane mast be costing assume and contain the	overes ramine e can-		The County of th
Enter new principal offices address, if appli	cable:	N/A	
(Principal office address MUST BE A STREA	FT ADDRESS)		
Trincipal Office data as security and the	<u></u>		
			· · ·
Enter new mailing address, if applicable:		N/A	
•			
(Mailing address MAY BE A POST OFFICE	<u> </u>	·	
B. If amending the registered agent and/or	registered office	address on our records, ei	nte <u>r the</u> name of <u>the new registere</u> c
agent and/or the new registered office addre	ess here:	_	
	N/A		
Name of New Registered Agent:			
New Registered Office Address:	N/A		
New Registera Office Address.		Enter Florida street a	ddress
			. Florida
		City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

HC CDP CT HOVE DEVIANCE INC. LLC

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	EVERSON E HERNANDEZ	1453 MARTINIQUE CT APT 6406	□Add
		WESTON, FL 33326	■Remove
			□Change
MGR	EXCEGLY V HERRERA	1453 MARTINIQUE CT APT 6406	≣ Add
		WESTON, FL 33326	□Remove
			□Change
			□Add
			Remove
			□Change
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ective date, if other than the a cliective date is listed, the date must te: If the date inserted in this bloomment's effective date on the De	t be specific and cannot be pri ook does not meet the appl	or to date of filing or mor licable statutory filing	(optional) e than 90 days after filing.) Pursuant to requirements, this date will not be	605,020 listed as
record specifies a delayed The 90th day after the reco		not an effective tir	me, at 12:01 a.m. on the ea	arlier o
JUNE 17	2020			
ted	·	·		
	Signature of a member or au	thorized representative o	f'a member	-
EVERXONE HIRNAN	:DFZ		ENCEGLY V HERRERA	

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Filing Fee: \$25.00