L20 000075775

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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Amend

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COVER LETTER

TO:

TO: Registration Se Division of Cor				
Molina Ren	nodeling LLC			es ^a
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:		
	Harold Miranda			
		Name of Person		
		Firm/Company		
	2531 Whale Harbor Lane			
		Address		
	Fort LAuderdale, FL 3331	2		
		City/State and Zip Code	-	
	haroldmiranda@hotmail.co	m to be used for future annual report not	iffication)	
For further information e	oncerning this matter, please c		,	
Harold Miranda		954 8098654 at ()		
Name o	f Person	Area Code Daytir	ne Telephone Number	
linclosed is a check for the	he 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 Certificate o Certified Co (additional copy	f Status & py
<u>Mailing Addres</u> Registration (<u>Street Address:</u> Registration So	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 632		The Centre of	Tallahassee oe Street, Suite 810	
Tallahassee,	1 12 24 2 1 1 4	2412 IV. MOHR	or succe suite ord	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Molina Remodeling LLC

Dispersible of the state of the (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ____ Florida document number L20000075775 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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
Mr	Antonio Molina	2531 Whale Harbor Lanne	
		Fort Lauderdale FL 33312	■Remove
			□Change
Mey	Harold Miranda	2531 Whale Harbor Lane	■Add
		Fort Lauderdale Ft. 33312	□Remove
			Li Change
			□Add
			∐Remove
			Change
			⊡Add
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record specifies a delayed effectiv I is filed.	e date, but no	ot an effective t	ime, at 12:01 a.	m, on the earlier	of: (b) The 90th	day after the
April 20th	.	2020				
//	//	/ 、				
	_///			tive of a member		

Typed or printed name of signee