L 200000 76204

(Requestor's Name)		
(Address)		
(Address)		
(0) (0) (1)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

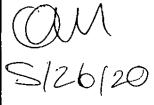
Office Use Only



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020 11AY -8 PM 2: 45



COVER LETTER

Division of Corporations
SUBJECT: Castellanus Home Renovation 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:
Ania Fidalgo Name of Person
Firm/Company
1714 Deauville DR.
City/Syste and Zip Code ania-fidal Con 190 anal Com E-mail address: (to be used for future annual eport notification)
For further information concerning this matter, please call:
Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Fee S25.00 Filing Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe

TO:

Registration Section

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

Street Address:
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

Castellanos Home (Name of the Limited Liability Compan (A Florida Limited Li	Penovation: LB PH 2: 45 v as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 200000 7620</u> 4	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
	Fidalgo Deaville DE Enter Florida street address MOA Florida 33619

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.

dity

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Type of Action Address Title Name Owner Ania Fidalgo 1714 Deaville Dr. XANDE Tampa F1. 33619 □Remove _____ □Change MGR Yunier Castellanos 1407 Margaret St. XAdd Tampa F1. 33619 | Remove ☐Change _____ □Add ____ □Remove _____ □Remove □Change ______ □Add

	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	-
		
		
		
		
		
f an effective Note: If th	date, if other than the date of filing: "e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuar he date inserted in this block does not meet the applicable statutory filing requirements, this date will not a effective date on the Department of State's records.	nt to 605.0207 be listed as t
record spe d is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th d	day after the
Dated <u>(</u>	Signature of a member or authorized representative of a member	
	an in A Fide (GD)	