120000083970		
(Requestor's Name) (Address)	000376889180	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	11/24/2101025025 **30.00	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: J. HORNE DEC 10 2021	FILED 2021 NOV 24 AM 9: 41 SECRETARY OF STATE TALLAHASSEE, FLORE	
Office Use Only		

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COVER LETTER

TO:	Registration Section
	 Division of Corporations

FURNITURE RESTORATION PLUS, 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:

ELIANA PENA FUGUET

Name of Person

FURNITURE RESTORATION PLUS, LLC

Firm/Company

7000 N. ORANGE BLOSSOM TRAIL

Address

ORLANDO, FL 32810

City/State and Zip Code

ELIANA@JCQSERVICES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

🔳 \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

\$

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> 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

FILED

2021 NOV 24 AM 9:41

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our record FALLAHASSEE. FLORE
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000083970</u> .	were filed on $\frac{0.3/1.7/2020}{0.000}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	<u>ility company here</u> :
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7000 N. ORANGE BLOSSOM TRAIL
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32810
Enter new mailing address, if applicable:	7000 N. ORANGE BLOSSOM TRAIL
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32810
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records. <u>enter the name of the new regis</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code

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

FURNITURE RESTORATION PLUUS, 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 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>	Name	Address	Type of Action
AMBR	GANNA QUIROGA	7000 N. ORANGE BLOSSOM TRAIL	🗆 Add
		ORLANDO, FL 32810	🗆 Remove
			🖻 Change
MGR ELIANA PENA FUGUET	ELIANA PENA FUGUET	ELIANA PENA FUGUET	🖬 Add
			🗆 Remove
		Change	
	<u></u>	🗆 Add	
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			□Change

and the second second

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: ______(optimized) ______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _// /19	. 2021	
	I H	
	Senature of a member or authorized representative of a member	
ELIANA PENA FUGU	₽ JET	

Typed or printed name of signee