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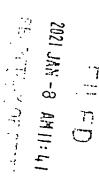
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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

Queen Exterior Solutions 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: Cheyenne Hughes Name of Person **Queen Exterior Solutions LLC** Firm/Company 2050 Normandy Heights Dr. Address Winter Haven Florida 33880 City/State and Zip Code joshqueen@rocketmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cheyenne Hughes 896-1307 Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: **■** \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$25.00 Filing Fee □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jueen Exterior Solut	tions LLL	40.1
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	<u>15.</u> )
The Articles of Organization for this Limited Liability Company  Clorida document number	y were filed on	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202 St.
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		9月至3
Mailing address MAY BE A POST OFFICE BOX)		17 E
		- '
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	rs
<del></del>	, Fl	orida
	Cuy	zip Code

## 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.

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
AMBR	Joshua Queen	2050 Normandy Heights Dr.	<b>≣</b> Add
		Winter Haven Florida 33880	□Remove
			□Add
			□Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	□Add
			Remove
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un eff <u>ote:</u>	we date, if other than the date of filing:
record is fil	d 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.
nted _	12/14/2020
,	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  Cheyenrie C. Hughes  Typed or printed name of signee