120000 240 679

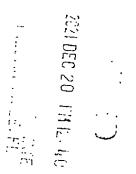
(Req	uestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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A BUTLER
JAN 6 2022

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: GIOUND UP HOME LENOUTHONS FMORING SERVICES LUI 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:
Jeremy Bolton Name of Person
Ground up Home Renovations & Marine Services We
1120 Reduced Ave B
Panama City FL 3240
Houndifess (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeremy Bolton at (850 814 - 6658) Name of Person at (850 B) Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
▼\$25.00 Filing Fee \$\ \tag{\text{Certificate of Status}}\$\$ \$55.00 Filing Fee \$\ \tag{\text{Certified Copy}}\$\$ \$60.00 Filing Fee, Certificate of Status \$\text{Certified Copy}\$\$ \$(additional copy is enclosed) Certified Copy \$(additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our records.) To rive Services (national company)
were filed on 8 10 20 me, and assigned
ity Company, "the designation "L.L.C."
P.O. Box 15674 panamacity, FL 32406
address on our records, <u>enter the name of the new registered</u>
Enter Florida street address
, Florida
City 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 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
			□ Add
			□Remove
			□Change
			□ Add
			□ Remove
			Change
			□Remove
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n effective ote: If the	ate, if other than the date of filing:	5.0207 ed as
ecord specis filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
ted De	ecember 15th, 2021.	
_	Signature of a member or authorized representative of a member	
	Janear 1 Priter	