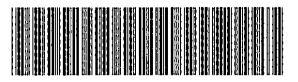
120000261419

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
,	ŕ	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	\	2/14/20

Office Use Only



700353402677

10/19/20--01028--007 **35.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 24, 2020

ROBERTO PEREZ SR. 3909 ANDALUSIA BLVD CAPE CORAL, FL 33909

SUBJECT: V&R 7 STAR'S REMODELING HOME SERVICES LLC

Ref. Number: L20000261419

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore Regulatory Specialist II

Letter Number: 620A00023703

COVER LETTER

.

TO: Registration Section Division of Corporations				
SUBJECT: VER 7	Stac's R	emodeling ed Liability Company	Home Se	ervices, LLC
The enclosed Articles of Amendment	and fee(s) are subn	nitted for filing.		
Please return all correspondence conce	rning this matter to	o the following:		
	Roberto	Name of Person		
<u>√ 4</u>	R 7 Sta	Firm/Company	ling Home	· Services, CCC
390	19 Andal	usia Blud.		
<u>Ca</u>	pe Coral	F(- 3390 City/State and Zip Code	7	
	E-mail address: (to	o be used for future annual	report notification)	
For further information concerning thi	s matter, please ca	11:		
Roberto Perez		at (<u>239</u>) <u>2</u> Area Code	764-226	.3
Name of Person		Area Code	Daytime releption	one Number
Enclosed is a check for the following:	imount:			
-	Filing Fee & icate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		\$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporation: P.O. Box 6327 Tallahassee, FL 32314	· ·	Divisio The Ce 2415 N	ddress: ration Section on of Corporatio entre of Tallahas I. Monroe Stree assee, FL 32303	ssee t, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2020 DEC 14 AM 7:50

V&K / Star's Remode	eling Home Services, CCC
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	Dany as it now appears on our recordeRETARY OF STATE TALL APASSES. FL
The Articles of Organization for this Limited Liability Compan	y were filed on $8/24/2020$ and assigned
Florida document number <u>L 20000 261419</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	pility 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 BON)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	Ç iş

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.

,11 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
MGR	Roberto Perez	3909 Andalu Sia Blu	d- XAdd
		3909 Andalu Sia Blu Cape Coral, FL. 33909	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
		□ Change	
			□Add
			□Remove

(If an et Note:	tive date, if other than the date of filing:
he reco ord is t	rd 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 iled.
Dated	December 9 2020 Raberto Vereg
	Signature of a member or authorized representative of a member
	Roberto Perez Typed or printed name of signee