L20000276540

(Reque	stor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Filin	g Officer:	
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Registration Section

Mailing Address:
Registration Section
Division of Corporations

P.O. Box 6327

TO:

Division of Corp	porations		
SUBJECT: L 4	M Custom Name of Limi	Carpentry ited Liability Company	LLC_
The enclosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Lyle	W-LLW/S Name of Person	
	Lam	Custom (C	urpentny
	L0321 L	enawle Str	ect
	Call	City/State and Zip Code	32404
	E-mail address: (1	o be used for future annual report noti	fication)
For further information ec	oncerning this matter, please ca	ill:	
Kyle Name of	Lewis Person	at (S50) HOAytim	- 2583 ne Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L + M Custom Carper	1 721 MAY 24/ AY1 107 49
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	0-2-2000
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number $L20000276540$.	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the design	nation "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 BOX)	
	_ .
B. If amending the registered agent and/or registered office address on our recordagent and/or the new registered office address here:	rds, enter the name of the new registered
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:

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 = M AMBR = A	anager uthorized Member		188 - 1984 - 1 884 1881 - 1884 - 1884	。 「100番) (4 (4 V) 元
<u>Title</u>	<u>Name</u>	Address	21 MAY 24	Type of Action
MGR	Tyler Maddox	6321 Leno	wee StD	$\mathcal{S}_{\square ext{Add}}$
	J	6321 Leno Callawai	171	iXRemove
			32404	□Change
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		. <u>. </u>	<u>.</u>	□Change
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. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary).
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Effective date, if other than the date of filing: 4-21-21 (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
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 cord is filed.
Dated 4-21-21/
Signature of a member or, authorized representative of a member
Kyle Lewis Typed or printed name of signee