## L20000305292

| (Re                     | equestor's Name)   |           |
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| (Ad                     | dress)             |           |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | siness Entity Nan  | ne)       |
| (Do                     | cument Number)     |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
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## **COVER LETTER**

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|--|------------------------------------|--|---|---|
| (2 + 1 + 2 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + |                                    | DDELING LLC                                  |   |   |
| SUBJF                                    | :C1:                               | Name of Lim                                  | ited Liability Company  | <u> </u>  |
| The em                                   | closed Articles of                 | Amendment and fee(s) are sub                 | mitted for filing.  |   |
| Please                                   | return all correspo                | ondence concerning this matter               | to the following:   |   |
|  |                                    | MARLENE DISOTUAR (                           | COBAS   |   |
|  |                                    |  | Name of Person  |   |
|  |                                    | YGJ REMODELING LLC                           |   |   |
|  |                                    |  | Firm/Company  | <del></del>   |
|  |                                    | 2601 WESTHIGH AVE                            |   |   |
|  |                                    |  | Address   |   |
|  |                                    | TAMPA FL 33614                               |   |   |
|  |                                    |  | City/State and Zip Code   | <del></del>   |
|  |                                    | MARLENEDISOTUAR@0                            |   | <del>are are a</del>  |
| For fur                                  | ther information c                 | oncerning this matter, please c              | to be used for future annual report not<br>all:                     | (meauon)  |
| MARL                                     | ENE DISOTUAR                       | R COBAS                                      | 813 900-8127  |   |
|  | Name o                             | f Person                                     |   | ne Telephone Number   |
| Enclose                                  | ed is a check for th               | ne following amount:                         |   |   |
| □ \$2                                    | 5.00 Filing Fee                    | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|  | Mailing Addres Registration S      |  | Street Address:<br>Registration Se                                  | ection  |
|  | Division of C                      |  | Division of Corporations  |   |
|  | P.O. Box 632                       |  | The Centre of   |   |
|  | Tallahassee, l                     | rt 3231 <del>4</del>                         | 24 LO IN. IVIONTO   | oc Street, Suite 810  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YGJ REMODELING LLC

| (Name of the Limited Liabil<br>(A Florid  | lity Company as it now appears on our records.)<br>la Limited Liability Company) |                          |
|---|--|--------------------------|
| The Articles of Organization for this Limited Liability (Florida document number L20000305292             | Company were filed on <u>09/28/2020</u>  | and assigned             |
| This amendment is submitted to amend the following:   |  |                          |
| A. If amending name, enter the new name of the lim  | nited liability company here:  |                          |
| The new name must be distinguishable and contain the words "Lin   | nited Liability Company," the designation "LLC" or t                             | he abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:   |  |                          |
| (Principal office address MUST BE A STREET ADD  | RESS)  |                          |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)                     |  |                          |
| B. If amending the registered agent and/or registere agent and/or the new registered office address here: |  | 7115                     |
| Name of New Registered Agent:   |  | . 13                     |
| Name of New Registered Agent.   | <del></del>  | دغ                       |
| New Registered Office Address:  | Enter Florida street address   | <u> </u>                 |
|   | , 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 = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>     | <u>Address</u>    | Type of Action |
|--------------|-----------------|-------------------|----------------|
| MGR          | YOANDI GIL JOSE | 2601 WESTHIGH AVE | ■Add           |
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|           | ADDING NEW MGR   |
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| Effecti   | ive date, if other than the date of filing: $\frac{02/01/2021}{}$ (optional)   |
|           | ective 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 ( If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t |
|           | ent's effective date on the Department of State's records.   |
|           |  |
|           | 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   |
| rd is fil | ed.  |
|           | 01/27/2021   |
| rs        | 011 0 1 10 00 1  |
| Dated     |  |
| Dated     | 01/27/2021<br>, Despray  |
| Dated     | Signature of a member or authorized representative of a member   |

Filing Fee: \$25.00