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COVER LETTER

TO:

Registration Section

Divisi	on of Cor	porations		14
SUBJECT:	-	TION HOME IMPROVEMEN	T LLC · ·	·
SCBJECT, _		Name of Lim	ited Liability Company	
The enclosed /	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspo	ndence concerning this matter	to the following:	
		JULIO R MORALES		
			Name of Person	
		EVOLUTION HOME IM	PROVEMENT LLC	
			Firm/Company	
	3391 MORNINGSIDE DR			
Address				
	KISSIMMEE FL 34744			
		_	City/State and Zip Code	
			OVEMENTS@OUTLOOK.CO	
		E-mail address: (to be used for future annual report n	otification)
For further info	ormation c	oncerning this matter, please co	ail:	
JULIO R MOI	RALES		321 305-150)7
	Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed is a c	heck for tl	ne following amount:		
■ \$25.00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Section		
	sion of C Box 632	orporations	Division of C	
		7 FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EVOLUTION HOME IMPROVEMENT LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on01/08/2021	and assigned
Florida document number <u>L21000023672</u>	
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 designation "LLC" or the abi	breviation "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)	
Truming undress 1971 BE 71 TOST OF THE BOTT	
B. If amending the registered agent and/or registered office address on our records, <u>enter the nam</u> agent and/or the new regi <mark>stered office address here</mark> :	e of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	å.
, Florida	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
MGR	JULIO R MORALES	3391 MORNINGSIDE DR	■Add
		KISSIMMEE FL 34744	□ Remove
			□Change
MGR	KIOHARYS Y MORALES	1894 DEL RIO CT	□Add
		DELTONA FL 32725	Remove
			☐ Change
			□ Remove
			□ Change
			🗆 Add
			Remove
			Change
			🗀 Add
			Remove
			Change
			□Add
		.	□Remove
			□Change

The sole purpose of this amendment	it is to ADD Mr. Julio R. Morales as a MANAGER and at the same time
DELETE Ms. Kioharys Y Morales	as a MANAGER of Evolution Home Improvement LLC.
	
ote: If the date inserted in this block do	of filing:
ecord specifies a delayed effective date, is filed.	, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
rtedFEBRUARY IST AA (2021
(Rold)	 +
Signati	ture of a member or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signee