

h21000072121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

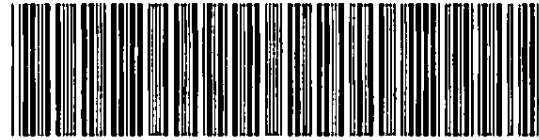
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG -6 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FL

AUG 06 2021

D CUSHING

~~COVER LETTER~~

TO: Registration Section
Division of Corporations

SUBJECT: CHIKY STUCCO RENOVATION AND CLEANING SERVICES LLC
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:

AUDEY CHAVEZ

Name of Person

CHIKY STUCCO RENOVATION AND CLEANING SERVICES LLC

Firm/Company

203 BEACH DR. APT. 1

Address

DESTIN FL. 32541

City/State and Zip Code

CHIKIGSXR2006@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FERNANDO RIVERA

Name of Person

224
at ()
Area Code

830-1703

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

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FAX COVER SHEET

TO	Amend
COMPANY	CHIKY STUCCORENOVATIONLLC
FAX NUMBER	18502456897
FROM	CESAR DAVID
DATE	2021-08-06 17:18:09 GMT
RE	

COVER MESSAGE

RECEIVED

2021 AUG -6 PM 3:09



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2021

AUDEY CHAVEZ
203 BEACH DR
APT. 1
DESTIN, FL 32541

SUBJECT: CHIKY STUCCO RENOVATION AND CLEANING SERVICES LLC
Ref. Number: L21000072121

We have received your document for CHIKY STUCCO RENOVATION AND CLEANING SERVICES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

The document must contain the usual business addresses of its managing members or managers.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 421A00018014

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CHIKY STUCCO RENOVATION AND CLEANING SERVICES 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 on 02/11/2021 and assigned
Florida document number L21000072121

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CHIKY STUCCO RENOVATION LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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 records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CRISTINA CORRALES

New Registered Office Address:

203 Beach Dr. Apt. 1
Enter Florida street address

Destin

City

Florida

32541

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

SECRETARY OF STATE
TALLAHASSEE, FL

2021 AUG -6 PM 5:05

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or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
-------	------	---------	----------------

AMBR	AUDEY CHAVEZ		
------	--------------	--	--

203 Beach Dr Apt. 1
Destin FL 32541

☐ Add☒ Remove

AMBR	CRISTINA CORRALES		
------	-------------------	--	--

203 Beach Dr Apt. 1
Destin FL 32541

☐ Change☒ Add☐ Remove

MGR	FERDANDO RIVERA		
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203 Beach Dr Apt. 1
Destin FL 32541

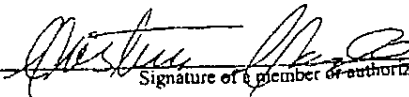
☐ Change☒ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (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 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated JULY 06, 2021



Signature of a member or authorized representative of a member

Cristina Carrasques

Typed or printed name of signee

Filing Fee: \$25.00