HZ1000140049

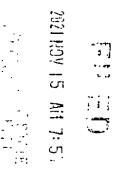
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
		—
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	_	

Office Use Only



000376431780

11/15/21--01024--012 **30,00



A. BUTLER
DEC - 6 2021

SUBJECT:				
, object.		Name of Lin	nited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
lease return	all correspo	ondence concerning this matter	to the following:	
		Christopher Bauman		
			Name of Person	
		Bauman Builds, LLC.		
		<u></u>	Firm/Company	·-···
		10293 Silver Pond Lane		
			Address	
		Lehigh Acres, FL. 33936		
		baumanbuilds@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti-	fication)
or further in	formation c	oncerning this matter, please co	all:	
Christopher E	Bauman		561 454-9789	
	Name o	「Person	at () Area Code Daytimo	e Telephone Number
inclosed is a	check for th	ne following amount:		
□ \$25.00 Fi	iling 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

ARTICLES OF ORGANIZATION OF

4) 11	
Barnen B		
(Name of the Chinte	d Liability Company as it now appea A Florida Limited Liability Company)	ars on off vechids) 15 F.C. 1:5;
The Articles of Organization for this Limited Lia		March 25, 2021 FE and assigned
Florida document numberL21000140086	<u>'</u>	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company h	ere:
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
Principal office address MUST BE A STREET		
Trincipal office address MOST BE A STREET	ADDKESS)	
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B		
	<u> </u>	
3. If amending the registered agent and/or re	gistered office address on our i	records, enter the name of the new register
gent and/or the new registered office address	here:	enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flo	rida street address
		, 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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member

•

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Christopher Bauman	10293 Silver Pond Lane, Lehigh Acres FL 33930	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			Discussive

		
		
		
<u></u>		
		
If an effective date is list Note: If the date inse	ther than the date of filing:	Pursuant to 605,0207 ill not be listed as t
e record specifies a de rd is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	90th day after the
11/12/21	1.27pm	
Dated		
Dated		
Dated 1771224	Signature of a member or authorized representative of a member	