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| (Requestor's Name) (Address) (Address) |
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| Special Instructions to Filing Officer: |
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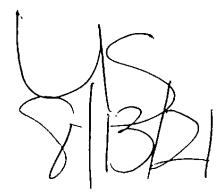
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| | | COVER LETTER | | |
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| TO: Registration S Division of Co | | | | |
| | ovations of Florida LLC | | | |
| SUBJECT: | Name of Lin | nited Liability Company | _ | _ |
| | | | | |
| | Amendment and fee(s) are sub | - - | | |
| Please return all correspondent | ondence concerning this matter | to the following: | | |
| | Omar A. Garcia | | | |
| | | Name of Person | | _ _ |
| | Home Improvements of Fl | lorida LLC | | |
| | | Firm/Company | - | 202 SE |
| | 15715 Markham Dr | | | 2021 AUS -3 PM 2: 33 SEGNETAN OF STATE SEGNETAN SEE TATE |
| | · | Address | | |
| | Clermont, Fl 34714 | | | IS -3 PN 2 |
| | | City/State and Zip Code | | -inst |
| | cflhimprovements@gmail.c | com to be used for future annual report not | tication\ | 33 - |
| For further information of | concerning this matter, please c | | neartin) | |
| Maritza Garcia | | 347 886-5734 | | |
| Name c | of Person | at () | e Telephone Numb | per |
| | | | | |
| Enclosed is a check for t | _ | | | |
| □ \$25.00 Filing Fee | ■ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certific | Filing Fee, cate of Status & ed Copy nal copy is enclosed) |
| <u>Mailing Addre</u> | <u>ss:</u> | Street Address: | | |
| Registration Division of C | | Registration Se Division of Cor | | |
| P.O. Box 632 | • | The Centre of T | • | |
| Tallahassee. | FL 32314 | 2415 N. Monro | e Street, Suite | 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Home Renovations of Florida LLC | | |
|---|---|-------------------------|
| (<u>Name of the Limited Liability Compan</u> (A Florida Limited Lia | v as it now appears on our records.) ability Company) | |
| The Articles of Organization for this Limited Liability Company w | vere filed on July 14, 2021 | and assigned |
| lorida document number 1.21000321146 | | |
| his amendment is submitted to amend the following: | | |
| . If amending name, enter the new name of the limited liabili | ity company here: | |
| Iome Improvements of Florida LLC | | |
| he new name must be distinguishable and contain the words "Limited Liability | y Company," the designation "LLC" or th | e abbreviation "L.L.C." |
| inter new principal offices address, if applicable: | | <u> </u> |
| Principal office address MUST BE A STREET ADDRESS) | | 021 AUG |
| | | 7 === |
| | <u></u> | |
| nter new mailing address, if applicable: | | · |
| Mailing address MAY BE A POST OFFICE BOX) | .1: | <u> </u> |
| | | 4 3 |
| . If amending the registered agent and/or registered office adgent and/or the new registered office address here: | ldress on our records, <u>enter the n</u> | ame of the new regis |
| 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 = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
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| ective date, if other than th | August | 1,2021 | , | (optional) | | |
| effective date is listed, the date me: If the date inserted in this l | ust be specific and cannot be p | prior to date of filing | or more than 90 day | s after filing.) | Pursuant | . to 605.020 he listed a |
| ument's effective date on the | Department of State's rece | ords. | mig requirement | io, trito dute ti | | |
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| cord specifies a delayed effecti s filed. | ve date, but not an effective | ve time, at 12:01 a. | m, on the eartier | or (o) The | antu da | iy anter the |
| July 28 | 2021 | | | | | |
| ed | · | · | | | | |
| | | | | | | |
| Mar.C | Signature of a member or a | | | | | |