Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Number : I20000000019
Phone : (305)552-5973
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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sit	DE BY SIDE INSTALLATION	is LLC			
(Name of the Limi	ted Liability Company as it now (A Florida Limited Liability Con	appears on our records.)			
The Articles of Organization for this Limited L Florida document number L21000414102	iability Company were filed	on <u>09/20/2021</u>	and a	assignee	i
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	I the limited liability comp	any here:			
The new name must be distinguishable and contain the	wirds "Limited Liability Company	"the designation "L.l.C" or th	e abbreviation	LLC.	
Enter new principal offices address, if applic	cable:		. 		
(Principal office address MUST BE A STREE	ET ADDRESS)		برا - حلا	 	
				300	****
			1	SEF	
Enter new mailing address, if applicable:			3. <u> </u>	<u> </u>	
(Malling address MAY BE A POST OFFICE BOX)				 -	<u>:</u>
	**********			<u>₹</u>	
		1 4 19	26.5	Ö	.1_4
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office address on <u>ss here</u> :	our records, enter the H	ame of the t	icwire;	steren
Name of New Registered Agent:	ANDRES ADOLFO PER	EZ			
New Registered Office Address:	981 EAST 28TH ST				
new registered Office 7 todiess.	E	nter Florida street address			
	HIALEAH	, Fiorida	33013		-
	City		Zip Co	de	

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 cm 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

09¹/₂₅/₂₀21 15:33 3052201440 LAZARUS CORPORATE PAGE 03/04

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
AMBR	ANDRES ADOLFO PEREZ	981 EAST 28TH ST	
		HIALEAH FL 33013	□Remove
		<u></u>	Change
			□Add.
			□Remove
			CJAdd
		***************************************	□ Remove
			□Change
			DÁdd
			Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			CRemove
			☐Change

	 :	
		
00/23/2002)		
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days).	option al) after filing.) Pursuant to 605.020	07
(If an effective date is listed, the date intent be specific and cannot be prior to date of hing or more than 90 days Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	, this date will not be listed a	LS '
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	of: (b) The 90th day after th	c
ecord is filed.	Van	
	2021 S	
Dated	SEP SEP	
Signature of a member or authurized representative of a member		
ANDRES ADOLFO PEREZ		
Typod or printed name of signee		