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SECRITARY OF STATE

DESCRIPTION OF SECULAR

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONSTRUCTION SERVICES & REPAIR LL								
(Name of the Limited Liability (A Florida L	Compar isnifed L	ny as it lability	ngw appe Compuny	ars on our r	rcords,)			
The Articles of Organization for this Limited Liability Con Florida document number L21000429365	mpany	wete,fi	iled on <u>"</u>	9/30/2021	<u></u>	an	d assig	ned
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limite	ed liabi	lity co	mpany.]	here:				
BEST MIAMI HOME PAINTERS LLC								
The new name must be distinguishable and contain the words "Limite	ed Liábil	lty Com	peny," the	designation	"LLC" or (ha abbreviatio	20 "L.L.1	C."
Enter new principal offices address, if applicable:				,	 :			
(Principal office address MUST BE A STREET ADDRE	<u>ess)</u>							
	,				<u>,</u>	· <u>-</u>		,
Enter new mailing address, if applicable:	1					7-07	ਲ	
(Mailing address MAY BE A POST OFFICE BOX)	'	<u> </u>	·· · · · ·		 	- []	<u>نځي</u>	
				- 	 		<u> </u>	- 74
B. If amending the registered agent and/or registered of	office a	iddres	s on our	records,	nter the	ame of th	e new	reester
agent and/or the new registered office address here:						E. F.S.	A 8:	0
Name of New Rogistered Agent:	· 					- 	. 2	
New Registered Office Address:	<u></u> _		Enter F	larida sırëet i	uddress			<u> </u>
					. Florid:	1		
		Cit	y	·····	_, 4 10 144	Zip (Corte	
New Registered Agent's Signature, if changing Registered	Agent:							•

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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 this limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

		address of each person being added
mending Authorized Person(s) authorized removed from our records:	to manage, enter the title hance has	
	· ·	; ;
CR = Manager IBR = Authorized Member		
Name Name	Address	Type of Action
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:		☐ Change
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		□Remove
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