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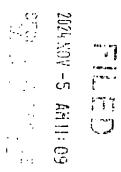
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

Tallahassee, FL 32314

	Registration S Division of Co			
enn ii.	Coastal W	ater Property Inspections LLC.		
SUBJEC	.1;	Name of Lim	ited Liability Company	
The encl	osed Articles of	'Amendment and fee(s) are sub	omitted for filing.	
		ondence concerning this matter		
		Joseph M Carver		
			Name of Person	
		Coastal Water Property In-	spections LLC.	
			Firm/Company	
		15496 Greenwood Ave		
			Address	
		Port Charlotte Florida 3	3981	
			City/State and Zip Code	
		jearver307(a)gmail.com		
المساه سال	on information .		to be used for future annual report notification)	. 12
		concerning this matter, please c		
Joseph A	d Carver		941 468-1579 at()	cn }
	Name (of Person	Area Code Daytime Teleph	one Number
Enclosed	l is a check for t	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 Addre Registration Division of C P.O. Box 63.	Section Corporations	Street Address: Registration Section Division of Corporation The Centre of Tallaha	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coastal Water Property Inspections LLC.						
(Name of the Limited Liability Compa (A Florida Limited)	inv as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number 1.22000051200	and assigned					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company here:					
Carvers Home Services LLC,						
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	15496 Greenwood Ave					
(Principal office address MUST BE A STREET ADDRESS)	S) Port Charlotte, Fl 33981					
Enter new mailing address, if applicable:	15496 Greenwood Ave	C 12				
(Mailing address MAY BE A POST OFFICE BOX)	Port Charlotte, Fl 33981	· · · · · · · · · · · · · · · · · · ·				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the n	ame of the newpregistere				
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>	<u>Name</u>	Address	Type of Action
			Remove
		<u> </u>	Change
		<u> </u>	□Add
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fective date, if other than the an effective date is listed, the date murote: If the date inserted in this blocument's effective date on the D	t be specific and o ock does not me	cannot be prior to cet the applica	o date of filing or	more than 90 da ing requiremen	s after filing.) Pu	usuant to 605,020° I not be listed as
record specifies a delayed effective is filed.	e date, but not a	in effective tii	ne, at 12:01 a.n	i, on the earlier	of: (b) The 9	0th day after the
October 30,		2024	<u> </u>			
	/	\bigcirc				
<u> </u>	Signature of a m	. (rized representati	va of a much		

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Filing Fee: \$25.00