L22000062519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 OCT 27 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/27/22--01000-009 **25.00

2022 OCT 27 PM 2:04

Amend.

10/27/22

DC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: High Standard Finishes
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following

Trey Jones
Name of Person

Firm/Company

719 Highland Ave
Address

lehigh acres FL 33972
City/State and Zip Code

treyjones@hsloiswfl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Trey Jones at (239) 8481470
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ■ $25.00 Filing Fee
- □ $30.00 Filing Fee & Certificate of Status
- □ $35.00 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 AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

High Standard Finishes LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Febuary 7, 2022 and assigned Florida document number L22000062519.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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TALLAHASSEE, FLORIDA

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, 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

[illegible]

MGR = Manager
AMBR = Attorneys Member

Type	Name	Address	Type of Notice
AMBR	Shane Walker	2203 Hamilton Ave Alva FL 33920	[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
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			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]
			[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207(1)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 24th, 2022

Signature of a member or authorized representative of a member

Trey Jones

Typed or printed name of signer

Filing Fee: $25.00