L22000075703

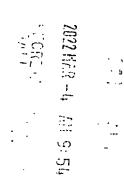
(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	,

Office Use Only



400382734684

93/94/22--01013--026 **25.00



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 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:	
Undany Mace nou	
M Home Renovation Firm/Company	
BEZ E 112H Aic Address	
City/State and Zip Code	
E-mail address: (to be usedifor future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (813) 279-3151 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
☐ \$30.00 Filing Fee & ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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**



(71 TOTAL DIMEG TIM	
The Articles of Organization for this Limited Liability Company we	ere filed on 2-15-22 and assigned
Florida document number <u>122000 75</u> .703	3
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	ty company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	202
(Principal office address MUST BE A STREET ADDRESS)	2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
-	
Enter new mailing address, if applicable:	12** 13.2
(Mailing address MAY BE A POST OFFICE BOX)	
-	
B. If amending the registered agent and/or registered office add	dress on our records, enter the name of the new registe
agent and/or the new registered office address here:	
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 Changing Registered Agent, Signature of New Registered Agent

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
MGR	yadany Macerray	SIDE EITEDAMD	CLAdd
			□Remove
			□Change
			🗆 Add
		= <u> </u>	Change ☐ Change
		; · · · · · · · · · · · · · · · · · · ·	
		<u> </u>	िता □ □Remove □ □
	•	- 	 □Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Remove
			□ Change

						<u> </u>	 .			<u>-</u>	
	<u></u>										
											
			<u>.</u>	_							-
		-			<u></u> _						
				_							
								_		<u> </u>	2022
										: -, ·	
			 			•					-
							.,				
									<u>.</u>	· · · ·	<u>.:</u> 21
		. <u> </u>								-	
											
											
			. <u>-</u>	<u></u>				_			
								· 	<u>.</u>		
n effective i te: If the	e date is listed e date inscr	d, the date m ted in this l	ne date of fi ust be specific block does n Department	c and can not meet	the appli	icable sta	f filing or (tutory fili	nore than ng requii	90 days a	ptional) ifter filing.) P this date wi	ursuant to 605.01 III not be listed
cord spe is filed.	ecifies a del	ayed effect	ive date, but	not an	effective	time, at	2:01 a.m	on the c	earlier of	(b) The 9	90th day after t
	·Fet	<u> 20</u>)	-V- , 1-	200	<u>2</u> 2.					
1ed				11							
,	tcl	$\mathcal{I} \subset \mathcal{I}$)	<u>n. L</u>		<u>.</u> .					