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(((H22000160276 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS SOLUTIONS & ACCOUNTING LLC

Account Number : I20210000168

: (407)203-8576

Fax Number

: (407)203-8576

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOPEZ TRIM & CONSTRUCTION LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

	ation Section n of Corporations	
LO SUBJECT:	PEZ TRIM & CONSTRUCTION LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Art	ticles of Amendment and fee(s) are submitted for filing.	
	correspondence concerning this matter to the following:	
	MIASEL MARTINEZ SEGURA	
	Name of Person	_
	LOPEZ TRIM & CONSTRUCTION LLC	
	Firm/Company	
	2121 QUEENSTOWN DR	
	Address	
	KISSIMMEE, FL 34746	
	City/State and Zip Code	
	info@bsaflorida.com E-mail address: (to be used for future annual report notification)	
For further inform	nation concerning this matter, please call:	
Miguel Romero	407 203-8576 at ()	
	Name of Person Area Code Daytime Telephoc	e Number
Eaclosed is a chec	ck for the following amount:	
■ \$25.00 Filing	Certificate of Status Certified Copy	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Division P.O. Bo	ation Section Registration Section of Corporations Division of Corporation	ee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOPEZ TRIM & CONSTRUCTION LLC	
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Company were filed on 04/15.	/2022 and assigned
Florida document number L22000160401	
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 design	mation "LLC" or the abbreviation "L.L.C."
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 reco	rds, enter the name of the new registered
agent and/or the new registered office address here:	2022
Name of New Registered Agent:	HA YA
New Registered Office Address: Enter Florida	street address
District Control of the Control of t	, 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
MGR	LEIDY CAROLINA LOPEZ	7795 INDIAN RIDGE TRAIL N	= Add
	Quinones	KISSIMMEE, FL 34747	□ Remove
			©Remove
			Change
			□Remove
			□ Change
			□Add
			□Remove
			UChange
			□Add
			□Remove
			ClChange
			□Add
			□Remove
			- Change

ADDING LEIDY CAROL	NA LOP	EZ QUI	NONES A	AS AN D	IGR					
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MAY 3RD		,	2022	·						
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Filing Fee: \$25.00