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| PICK-UP                 | ☐ WAIT            | MAIL      |
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| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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## **COVER LETTER**

TO:

|   | gistration Se<br>vision of Cor |  |  |   |
|---|--------------------------------|--|--|---|
| CHD ICCT.                                     |                                | s & Sales, LLC                                       |  |   |
| SUBJECT:                                      |                                | Name of Lim  | ited Liability Company   | <del></del>   |
| The enclose                                   | d Articles of                  | Amendment and fee(s) are sub                         | mitted for filing.   |   |
| Please retur                                  | n all correspo                 | ndence concerning this matter                        | to the following:  |   |
|   |                                | Jennifer J Klukowski                                 |  |   |
|   |                                |  | Name of Person   |   |
|   |                                |  | Firm/Company   |   |
|   |                                | 7078 Poppas Pass                                     |  |   |
|   |                                |  | Address  |   |
|   |                                | Brooksville, FL 34602                                |  |   |
|   |                                |  | City/State and Zip Code  |   |
|   |                                | jenkhikowski@gmail.com                               |  | AN THE LAND   |
| For further                                   | information c                  | n-man address: (<br>oncerning this matter, please ea | to be used for future annual report no<br>all:                   | actication)   |
| Jennifer Kl                                   | ukowski                        |  | 352 650-7171   |   |
|   | Name o                         | f Person   | Area Code Dayti  | me Telephone Number   |
| Enclosed is                                   | a check for th                 | ne following amount:                                 |  |   |
| □ \$25.00                                     | Filing Fee                     | S30.00 Filing Fee & Certificate of Status            | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|   | ailing Addres                  |  | Street Address:  | ection  |
| Registration Section Division of Corporations |                                |  | Registration Section Division of Corporations                    |   |
| Ρ,  | O. Box 632                     | 7  | The Centre of  | Tallahassee   |
| Ta  | illahassee, l                  | FL 32314   | 2415 N. Monr   | oe Street, Suite 810  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Renovations & Sales, LLC

company has been notified in writing of this change.

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(Name of the Limited Liability Company as it now appears on our records CRETATRY OF S The Articles of Organization for this Limited Liability Company were filed on  $\frac{8/1/2022}{1}$ and assigned Florida document number <u>L 22 000</u> 334234 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Jennifer J Klukowski, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Same Enter new principal offices address, if applicable: 7078 Poppas Pass (Principal office address MUST BE A STREET ADDRESS) Brooksville, FL 34602 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: Sunac Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida 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

If Changing Registered Agent, Signature of New Registered Agent

If ameriding 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 |
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| Effective date, if other than the date of filing:  8   2G27 (optional)  Far 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 605.02 date in instruction in this block does not meet the applicable statutory filing requirements, this date will not be listed allocument's effective date on the Department of State's records.  For excord 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 distribution of the state of the |  |
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| ffective date, if other than the date of filing:    S   1   2 G Z Z   (optional)   |  |
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| ffective date, if other than the date of filing:    S   1   2672   (optional)  | m'n —  |
| ffective date, if other than the date of filing:    8   1   2022   (optional)  | <u> </u>   |
| 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 605.026 inte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records.  The 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 dated that the specifies are delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dated that the specifies are delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dated that the specifies are delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dated that the specifies are delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dated that the specifies are delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dated that the specifies are delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dated that the specifies are dated to the specifies are delayed effective date.  | <del></del>  |
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|  | ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the  |
| Signature of a member or authorized representative of a member   | 129 2022   |
| Signature of a member of authorized representative of a member   |  |
|  | Signature of a member of authorized representative of a member   |

Filing Fee: \$25.00