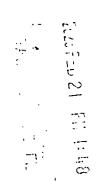
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COVER LETTER

TO:

Registration Section

Divisi	ion of Cor	porations		·
	LEAR SK	Y HOME INSPECTIONS LL	C.	
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed A	Articles of A	Amendment and fec(s) are sub-	mitted for filing.	
Please return a	ll correspo	ndence concerning this matter	to the following:	
		Brigit Kisling Garcia		
			Name of Person	
			Firm/Company	
		1012 SW 24 AVE #1		7 6
			Address	
		FORT LAUDERDALE, FI	L 33312	ication)
			City/State and Zip Code	-53 -51
		clearskyinspections@gmail.		<u> </u>
For further info	ormation c	E-mail address: (oncerning this matter, please c	to be used for future annual report notif	ication)
Brigit Kisling	Garcia		954 478-1433 at ()	
	Name of	f Person		Telephone Number
77 1	a 1 e 1	Callandina anno an		
□ \$25.00 Fil		e following amount: \$\Boxed{\Boxesia} \\$30.00 \text{ 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)
	ng Addres stration S	-	Street Address: Registration Sec	tion
_		orporations	Division of Con	
	Box 632		The Centre of Ta	
Talle	haccee I	EL 32314	7415 N. Monroe	Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLEAR SKY HOME INSPECTIONS LLC.	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Cor	v appears on our records.) npany)
The Articles of Organization for this Limited Liability Company were filed clorida document number 1.22000513662	4 on 12/07/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "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)	ب <u>تن</u> .
	in i
B. If amending the registered agent and/or registered office address or agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	nter Florida street address
City	, 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 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
AMBR	Jabnel Rodriguez Martell	1012 SW 24 AVE #1	= Add
		Fort Lauderdale, FL 33312	□Remove
			□Change
AMBR	Brigit Kisling Garcia	1012 SW 24 AVE #1	= Add
		Fort Lauderdale, FL 33312	□ Remove
			 . ~
Р	Jabnel Rodriguez	1012 SW 34 Ave #W	r⊠Add .
		Fort Lauderdale, FL 33312	• •
			Change
<u>VP</u>	Brigit E Kisling	1012 SW 34 Ave #W	□Add
		Fort Lauderdale, FL 33312	⊠Remove
			□Change
			&∧dd
			□Remove
			□Change
			□Add
			□ Remove
			□ Change

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