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Special Instructions to	Filing Officer:	





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A. RIVERS APR 2 6 2023

## **COVER LETTER**

	egistration Sectivision of Corp			
SUBJECT	AFFINITY	RENOVATION SERVICES	LLC	
SUBJECT		Name of Lim	ited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retui	n all correspor	ndence concerning this matter	to the following:	
		RAQUEL MELENDEZ SA	ANTAELLA	
			Name of Person	
		AFFINITY RENOVATION	N SERVICES LLC	
		<u> </u>	Firm/Company	
		3268 WAUSEON DR,		
			Address	
		SAINT CLOUD, FL 34772	2	
			City/State and Zip Code	
		affinityrenovationservicesllo	<del></del>	
			o be used for future annual report noti	fication)
For further:	information co	ncerning this matter, please ca	ill:	
RAQUEL N	MELENDEZ S	ANTAELLA	863 207-8070 at ( )	
	Name of	Person		e Telephone Number
Enclosed is	a check for the	following amount:		
\$25.00	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)
Re Di P.0	diling Address: gistration Se vision of Co D. Box 6327 llahassee, FI	ection rporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL	porations fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AFFINITY RENOVATION SERVICES LLC		
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on 12/08/2022	and assigned
Florida document number L22000515625		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or t	he 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 offic	e address on our records, <u>enter the</u> i	name of the new regist
agent and/or the new registered office address here:		2023 SEI
		FEB FEB
Name of New Registered Agent:		B
New Registered Office Address:		
	Enter Florida street address	3
	, Florida	- Cox 6:
	City	TZip Coult

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>	<u>Address</u>	Type of Action
MGR	RAQUEL MELENDEZ SANTAEI	3268 WAUSEON DR.	<b>=</b> Add
		SAINT CLOUD, FL 34772	□Remove
		<del> </del>	
			Remove
			□Change
			□Remove
			□Add
			Remove
		<del></del>	
			□Add
			Remove
			Change
			□Add
		· 	Remove
			□ Channa

AFI	FINITY RENOVATION SERVICES LLC
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ective	date, if other than the date of filing:  O2/17/2023 (optional)  ve 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
<u>te:</u> If i	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ument	's effective date on the Department of State's records.
cord s	becifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
filed.	
	2/17/2023
ed	Rapul muliage
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	RAQUEL MELENDEZ SANTAELLA

Filing Fee: \$25.00