Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000146486 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PAGIO'S & ASSOCIATES, LLC

Account Number : I20100000043 : (305)397-8553

Fax Number : (305)397-8521

 $\emph{\texttt{\#}}$ 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 AZUL & ORO REMODELING LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help T. LEMIEUX APR 2 0 2023

Ÿ

COVER LETTER

TO: Registration Division of C			
our in cr	AZUL & OR	O REMODELING LLC	
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	τ to the following:	
		LIA GARAYAR	
		Name of Person	
	AZ	UL & ORO REMODELING LLC	
		Firm/Company	
		1125 NW 110 STREET	
		Address	<u></u> _
		MIAMI, FL 33168	
		City/State and Zip Code	
	LIAGA	ARAYAR@HOTMAIL.COM	
	E-mail address:	(to be used for future annual report not	ification)
For further information	concerning this matter, please o	call:	
LIA (GARAYAR	786 356 at () Area Code Doytin	
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Piling Fee	☐ \$30.00 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)
Mailing Addr Registration		<u>Street Address:</u> Registration Se	ction
_	Corporations	Division of Con	
P.O. Box 63	27	The Centre of I	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New Registered Office Address: Enter Florida street a	ddress	5: 23
New Registered Office Address:	•	2 2:
New Registered Office Address:	•	2 2:
	<i>€</i>	
	· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent:	·	
		4
agent and/or the new registered office address here:		
B. If amending the registered agent and/or registered office address on our records, e	nter the name of th	e nesv registe
	-	ಜ
	<u></u>	2
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation	"LLC" or the abbreviat	ion "L.L.C."
A. If amending name, enter the new name of the limited liability company here:		
This amendment is submitted to amend the following:		
Florida document numberL23000090272		
The Ardeles of Organization for this Entitled Clapmity Company were filed on	0/2023 a	nd assigned
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	ccorus.	
AZUL & ORO REMODELING LLC (Name of the Limited Liability Company as it now appears on our of	records.)	

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>	Name	Address	Type of Action
MGR	GARAYAR, LIA	1125 NW 110 STREET	
		MIAMI, PL 33168	■Remove
AMBR GARAY.	GARAYAR, LIA	1125 NW 110 STREET	Æ Add
		MIAMI, FL 33168	□Remove
			□ Change
			□Remove
			☐ Change
			OAdd
			□Remove
			☐ Change
		□Add	
			□Remove
			☐ Change
			□Add
			□Remove
			Change

.

If amending	; any other information, ei	ter change(s) here: (Attach additional sheets,	if necessary.j
			-
			
_			
			<u></u>
	·		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		<del></del>
<del></del>		<del></del>	· · · · · · · · · · · · · · · · · · ·
lf an effective de <u>Note:</u> If the d	ite is listed, the date must be speci	filing:	s after filing.) Pursuant to 605.0207
e record specif rd is filed.	lies a delayed effective date, b	it not an effective time, at 12:01 a.m. on the earlier	of: (b) The 90th day after the
Dated	APRIL 19	2023	
		AFAUAF	
		of a member or authorized representative of a member	
		LIA GARAYAR	
		Typed or printed name of signee	