## L23000114156

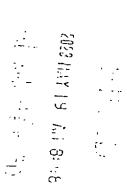
(Re	equestor's Name)	
<b>,</b>	,	
(Ác	ddres <b>s</b> )	<u> </u>
(Ac	ddress)	<u> </u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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A. RIVERS

JUL 19 2023

## **COVER LETTER**

Registration Section

Division of Corporations

TO:

NORTH ROSUBJECT:	OME DOOR & MILLWORK I	LLC		
SUBJECT:	Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	MAITRI PATEL, CPA			
		Name of Person		
	MAITRI & ASSOCIATES	S, LLC		
		Firm/Company	<del></del>	
	6 PETTEE PL			
		Address	<del></del>	
	FOXBORO, MA 02035			
		City/State and Zip Code		
	maitri@mataxfirm.com			
	E-mail address: (	to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please e	all:		
MAITRI PATEL, CPA		813 784-6095 at ()		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for the	ne following amount:			
<b>≘</b> \$25,00 Filing 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 Address Registration S Division of C	Section	<u>Street Address:</u> Registration Se Division of Cor	porations	
P.O. Box 632		The Centre of T		
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.) Hity Company)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L23000114156</u> .	ere filed on MARCH 06,2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabilit</u>	y company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," 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:	285
Mailing address MAY BE A POST OFFICE BOX)	
Mulling dudiess may be a rost of rice boxy	0
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	iress on our records, enter the name of the new regist
Name of New Registered Agent:	
Nove Bouletored Office Address	
New Registered Office Address:	Enter Florida street address
	, 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
MEM	ROBERT DAVID RUFFNER	13815 ANONA HIGHTS DR	
		LARGO, FL 33774	
			Change
		□Remove	
			Change
			🗆 Add
			□ Remove
			Change
			🗖 Add
		□ Remove	
			Change
		🗆 Add	
		🗆 Remove	
		□ Λdd	
		□ Remove	
			□ Change

If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  1 WOULD LIKE TO ADD THE EIN: 92-2691588
(If an e <u>Note</u>	tive date, if other than the date of filing:  MAY 15 2023  (optional)  ffective 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  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	ord 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 filed.
Date	Les De lum
	Signature of a member or authorized representative of a member
	KURT PLUM

Filing Fee: \$25.00