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COVER LETTER

	stration Sec sion of Corp				
CHID BECT.		ate Home Improvements LLC		;	
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	Articles of z	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspoi	ndence concerning this matter	to the following:		
				·	_
		ZenBusiness INC	Name of Person		
			Firm/Company		_
		336 E. College Ave Suite	301		
		<u> </u>	Address		- !
		Tallahassee, FL 32301			
		fulfillment@zenbusiness.cc	City/State and Zip Code		- <u>:</u>
			to be used for future annual re	port notification)	·
For further inf	ormation co	oncerning this matter, please co	all:		_ `
c/o ZenBusir	iess INC		844 493- at ()	6249	
	Name of	Person	Area Code	Daytime Telephone Number	<u>ः</u>
Enclosed is a	check for the	e following amount:			
■ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclo	sed) Certified	ate of Status &
	ing Address		Street Add		
	istration S sion of Co	ection orporations		ion Section of Corporations	
P.O.	Box 6327	7		re of Tallahassee	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

were filed on $3/16/2023$ and assigned	Sunshine State Home Improvements LLC		
ility company here: lity Company," the designation "LLC" or the abbreviation "LLC."	(Name of the Limited Clability Col (A Florida Limit	mpany as it now appears on our records, ted Liability Company)	.)
lity Company," the designation "LLC" or the abbreviation "LLC."	ne Articles of Organization for this Limited Liability Compa	any were filed on 3/16/2023	and assigned
lity Company," the designation "LLC" or the abbreviation "LLC."	orida document number 1.23000136262		
lity Company," the designation "LLC" or the abbreviation "LLC."			
lity Company," the designation "LLC" or the abbreviation "LLC."	nis amendment is submitted to amend the following:		
lity Company," the designation "LLC" or the abbreviation "LLC."	. If amending name, enter the new name of the limited 1	iability company here:	
		•	
	ne new name must be distinguishable and contain the words "Limited L.	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
	nter new principal offices address, if applicable:		
	<u>Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>	<u></u>
			. (+)
· · · · · · · · · · · · · · · · · · ·			
- 	nter new mailing address, if applicable:		
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	The second secon		.: =
address on our records, enter the name of the no	Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered officent and/or the new registered officent and offic	ce address on our records, <u>enter t</u>	he name of the no
	nt and/or the new registered office address here:		
	Name (CN) or Decision 1.4		
	Name of New Registered Agent:		
	New Registered Office Address:		
		Enter Florida street address	
Enter Florida street address		Flor	rida
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
AMBR	Alex Richard Wyckoff	75143 Ravenwood Dr	≡ Add
		Yulee . FL 32097	□Remove
			□Change
AMBR	Ryan Hawley	101 Baird way	≣ Add
		St. Mary's . GA 31558	□Remove
		 	☐ Change
			. □Remoye
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			□Change

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ctive date, if other than the ceffective date is listed, the date must refer the date inserted in this blooment's effective date on the Department.	ate of filing: be specific and cannot be prior to date of filing or neck does not meet the applicable statutory filing fartment of State's records.	(optional) nore than 90 days after filing.) Pursuant to 605.02 ag requirements, this date will not be listed
ord specifies a delayed effective filed.	date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day after th
d	. 2023	
/s/ Daniel	Patrick Carlan	
	ignature of a member or authorized representative	