LZ3000 41342S

(Re	equestor's Name)	
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יריו	udi e 33)	
(Ac	ddress)	
	A. 101-1-17:- 17:- 17:- 41:	
(CI	ity/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to Fili	ng Officer:	
<u>.</u>		

Office Use Only



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COVER LETTER

	gistration Sect vision of Corp				
STID IDZTTA	Unlimited Ho	ome Improvements , LLC	k _		
AUDJECT.		Name of Lim	ited Liability Company		
The enclose	d Articles of A	mendment and fee(s) are sub	mitted for filing.		
		dence concerning this matter			
		Steven Luis			
			Name of Person		
			Firm/Company		
		15921 south west 54th Plac	ce		
		····	Address	<u> </u>	
		Davie, Florida 33331			
			City/State and Zip Code		
		stevenluis42@gmail.com E-mail address: (to be used for future annual rep	port notification)	
For further i	nformation cor	ncerning this matter, please ca	all:		
Steven Luis			954 446 3 at () 	210	,
	Name of I	Person	Area Code	Daytime Telephor	ne Number
Enclosed is	a check for the	following amount:			
■ \$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)
<u>Ma</u>	iling Address:		Street Add	ress:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Unlimited Home Improvements , LLC	~
(Name of the Limited Liab	ility Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L23000413425	Company were filed on $\frac{09/05/2023}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lit	nited liability company here:
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(<u>Principal office address MUST BE A STREET ADD</u>	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our records, <u>enter the name of the new registered</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
<u></u>	, 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 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
MGR	Steven Luis	15921 sw 54th PI	Davie FL 3333	<u>l</u> ≣Add
			<u>. </u>	□Remove
				□Change
		, <u>-</u>		□Add
				□Remove
				□Change
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				🗆 Remove
				□Change

	
lf an ei <u>Note:</u>	tive date, if other than the date of filing:
e reco rd is f	rd 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 iled.
Dated	December 10 2023.
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00