Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : I20180000102 Phone : (305)799-7633 Fax Number : (305)564-6857

**Enter the email address for this business entity to be used for future;

annual report mailings. Enter only one email address please.** 「

COLOR S SERVICION CONTRACTOR SERVICE S

mail	Address:	• •	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIVE STARS INSTALL LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIVE STARS INSTALL LLC		
(Name of the Limited Liability Com (A Florida Lumb	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on 09/06/2023	and assigned
Florida document number L23000415352		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		SEC. 202
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		NA PARA
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	ia
	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>	Name	Address	Type of Action
MGR	PABLO SANCHEZ	1211 W 34TH ST	□Add
		HIAL PAH EL 33012	□Remove
			■ Change
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□Add
			□Remove
			□Change
			[]Add
			□Remove
			□Change
			□ Add
			ПКеточе
			☐ Change
			DAdd
			□Remove
			☐ Change
			□Add
			Remove
			Change

lf ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Note:	ive date, if other than the date of filing: [ective 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 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tent's effective date on the Department of State's records.
the reco cord 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 led.
Dated	January 16th 2024
	Signature of a member or authorized representative of a member
	PABLO SANCHEZ
	Typed or printed name of signee

- From RCA ACCOUNTING SERVICES CORP 1.305.564.6857 Tue Jan 16 06:37:32 2024 MST Page 4 of 4

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