10/18/23, 7:30 AM

Division of Corporations

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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

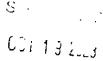
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNRISE REMOD HOMES LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

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Corporate Filing Menu

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COVER LETTER

TO: Registration Se Division of Cor			
	REMOD HOMES LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Cheyenne Moseley		
	<u> </u>	Name of Person	
	Legalzoom.com, Inc.		
•		Firm/Company	
	101 N Brand Blvd 11th Fl		
	,	Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	gene0482@yahoo.com	to be used for future annual report notif	ention
			reamou)
For further information of	concerning this matter, please or	all;	
Cheyenne Moseley		800 773-0888 at ()	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Fiting 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)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNRISE REMOD HOMES LLC		
(Name of the Limited Liabili (A Florid	lty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number <u>L23000457101</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	170 170 170
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	and the second s	
(Principal office address MUST BE A STREET ADD	RESS)	•
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, g	enter the name of the r
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	Zip Code
	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 heing 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

_____ 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

Title	Name	Address	Type of Action
AMBR	BRUGRIYEV, EUGENE		Add
		136 SEQUOYAH DR. PORT CHARLOTTE, FL 33954	≅ Remove
		W8 14 7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	☐ Change
AMBR	Yevgeniy Bugriyev	136 Sequoyah Dr. Port Charlotte, FL 33954	
			Remove
			Change
			□ Remove
			□ Change
			
		· Andrews	Remove
			☐ Change
			D Add
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			Change
	A		□ Add
			□ Кеточе

,	Page: 6 of 6	2023-10-18 05:34 35 PDT	LegalZoom.com, Inc.	From; Richard
D. If amen	ding any other inform	ation, enter change(s) here: (Attach ad	ditional sheets. (f necessary.)	
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<u>Note:</u> If	the date inserted in this	te date of filing: ust be specific and cannot be prior to date of filing block does not meet the applicable standary Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to filing requirements, this date will not be	605.0207 (3)(b) listed as the
(b) The 9	Oth day after the re			rller of:
Dated _	October	Yevreniy Busiye Signature of a exemper or authorized represent		
		Yevnerry Burrige	·V	
		Signature til a member or authorized represent	alive of a member	
	Yevgeniy Bugriyev	Typed or printed name of sign	ec	-