## 24000114862

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
(Bu:	siness Entity Name)	
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Certified Copies	Certificates of	Status
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Special Instructions to I	Filing Officer:	
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## **COVER LETTER**

TO: Registration Se Division of Cor		•	ì
Blue Horizo	on Remodeling, 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:	
	Lucas W. Taylor		
		Name of Person	
	Blue Horizon Remodeling	LLC	
		Firm/Company	
	10025 Muscogee Road		
		Address	
	Milton, FL 32583		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	bluehorizonremodels@gma		
	E-mail address: (	to be used for future annual report notif	lication)
For further information of	concerning this matter, please c	all:	
Brandei Taylor		850 844-5539 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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)
Mailing Addre	ce.	Struut Addrass	

Mailing Address:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

Blue Horizon Remodeling, LLC			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our Liability Company)	r records.)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L24000114862}{L24000114862}$ .	y were filed on	4	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation	on "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		TMLL COST	7024 HAY
• • • • • • • • • • • • • • • • • • • •			
(Mailing address MAY BE A POST OFFICE BOX)			<b>111</b>
	<del></del>		9
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	, enter the name o	
Name of New Registered Agent:		·	
New Registered Office Address:			
	Enter Florida street address Florida		
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>		
I hereby accept the appointment as registered agent and ag	ree to act in this capaci	ty. I further agree	to comply with
provisions of all statutes relative to the proper and complete	e performance of my du	ties, and I am fan	iliar 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
AMBR	Lucas W. Taylor	10025 Muscogee Road	<b>∃</b> Add
		Milton, FL 32583	□Remove
AMBR			
AMBR MGR	Brandei Taylor	10025 Muscogee Road	<b>=</b> Add
		Milton, FL 32583	□Remove
			□Change
			□ Remove
			□Change
<del></del>		<del></del>	□ Add
			Remove
			Change
			□Remove
			Change
			□Add
			Remove
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this lighters are the second of the	block does not meet	the applicable st	of filing or more than a	<b>(optional)</b> 90 days after filing.) Pu ements, this date will	rsuant to 605,0207 I not be listed as
document's effective date on the	Department of State	s records.			
record specifies a delayed effect d is filed.	ive date, but not an e	ffective time, at	12:01 a.m. on the ea	urlier of: (b) The 90	Oth day after the
Dated May 6	20	)24			
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