L24000225040

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

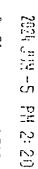




200430907682

05./05/24 -01017--012 •#60.00

4120124





COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT:	MG. Quality Name of Lim	REMODELING 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:	
	FELIX	R. GAROJA Name of Person	
		Puality REMPS	
	3503 C	PORMORANT -	BRANCH CE
	JACK	SONDING FL City/State and Zip Code	32223
	FE / X Z U E-mail address: (LEN 10 hotmail to be used for future annual report n	(.ew)
For further information of	concerning this matter, please ca	•	
FELIX Name o	R. CSARCIA of Person	at (<u>904)</u> <u>424</u> Area Code Dayt	1 - V286 ime Telephone Number
Enclosed is a check for the	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 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

FGM Quality Rompar (A Florida Limited L	SMODELING	
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ty as it now appears or our lability Company)	records.)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L24000225040</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	on "Ll.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-7/a	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records,	enter the name of the new registered
77.	1/2	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	t address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre	a to get in this canaci	I further gorne to much with the
provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of	performance of my dui rovided for in Chapter	ies, and I am fāmiliar with and it is 605, F.S. Or; if this document is
company has been notified in writing of this change.		
	71/2	2: - 2: - 2: - 2:
If Chang	zing Registered Agent, <u>Sigr</u>	ature 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>	Name		Address		Type of Action
MGR	ANDREA ISAB	ELA GARCIA MALESPI	N=3503	CORMORAUT BRANCH	<u>H</u> XAdd
			JACK	USONVIlle, FL 32223	3_ □Remove
					□Change
	<u></u>				□Add
			\		□Remove
					□Change
					🗆 Add
					□Remove
					□Change
***************************************					□Add
					□Remove
					□Change
					□ Add □ Bemove - 1
				: ;	Un □Change
				- t- - t- - t-	O Add
				·	□Remove
					□ Change

	- 10 to - 10 t		· · · · · · · · · · · · · · · · · · ·		
 					_
		· · · · · · · · · · · · · · · · · · ·			<u>-</u>
					_
					_
 					_
					_
		<u> </u>			
					_
					_
					_
					_
te: If the date inserted in the	the date of filing: must be specific and cannot be prise block does not meet the appreciance Department of State's reconstruction.	plicable statutory filing requ	irements, this date	will not be li	sted a
			earlier of: (b) Th	ie 90th day af	for the
cord specifies a delayed effo	ective date, but not an effectiv	re time, at 12:01 a.m. on the	carrier of (0)		
cord specifies a delayed effo s filed.		re time, at 12:01 a.m. on the	carner or. (b)		
cord specifies a delayed effo s filed.	-28-2874	re time, at 12:01 a.m. on the	carrier of. (0)	202k JUN 5 17 1	
cord specifies a delayed effo s filed.	-28-2024	Athorized representative of a m			