## L24000357656

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

TO:

TO: Registration Se Division of Cor			
Lelis Pools SUBJECT:	& Renovations 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:	
	Nivonelio C Lelis		
	<del>-</del> .	Name of Person	<del></del> _
	Lelis Pools & Renovations	LLC	
		Firm/Company	<del>.</del>
	8448 Belvedere Rd A3		
		Address	
	West Palm Beach, FL 334	11	
	-	City/State and Zip Code	<del></del>
	nelio@lelisbrick.com		
	E-mail address: (	to be used for future annual report no	tification)
For further information c	oncerning this matter, please co	all:	
Nivonelio Lelis		561 400-0400 at()	
Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S		Street Address:	action
Division of C		Registration Se Division of Co	
P.O. Box 632	7	The Centre of	Tallahassee
Tallahassee, l	FL 32314	2415 N. Monra	oc Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF AREA ED

Lelis Pools & Renovations LLC

2024 OCT -7 PH 4: 21

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

<i>((1110))</i>	da Elimica Eliability Company)
The Articles of Organization for this Limited Liability Florida document number L24000357656	Company were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
agent and/or the new registered office address here:	ed office address on our records, <u>enter the name of the new registero</u> :
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Enter Florida street address
	, 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
AMBR	Deven I. Asselin	8448 Belvedere Rd A3	□ Add
		West Palm Beach, FL 33411	≣Remove
			□Change
AMBR	Erica Coetho	8448 Belvedere Rd A3	■Add
		West Palm Beach, FL 33411	□ Remove
			Change
	<del></del>		□Add
		<del></del> -	Remove
			Change
			□Add
			Remove
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ective date, i	if other than th	e date of filir	ng:			(option	al)	
effective date i	s listed, the date mi	ust be specific ar	nd cannot be prio	r to date of fili	ng or more than	90 days after fil	ing.) Pursuant to 60	5.020
	tive date on the I				ry ming requir	ements, this d	ate will not be lis	tea a
cord specifies filed.	a delayed effecti	ve date, but no	ot an effective	time, at 12:0	l a.m. on the e	arlier of: (b)	The 90th day after	er the
October 3	•			_1.	1 -			
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Typed or printed name of signee