# 124000360419

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		J. HORNE
		NOV 2 2 2024

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**900437474939** 10/29/24--01634--601 ##25.00

> FILED 2024 OCT 29 AM 11: 22

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J	FLORIDA DEF	PARTMENT C	OF STATE Date: 🕾	Nº 0/29/24	07681
RECEIVED FROM:	licole	Knech	te/		•••••
the sum of Turn	ty five	Doll	ars \$d	5.00	***********
For the following: A					
Justin Hem	z Repai	irs 660		24 - 3600	419)
			- 10/29/2401 - 10/29/2401	1034001 <b>*</b>	
		//.	Herri	79	,
			fo	r Secretary	of State

## THIS MONEY PAID INTO THE STATE TREASURY

### .COVER LETTER

TO:

**Registration Section** 

Division of C	orporations			
SUBJECT:			REPAIR LL	
	Name of Lin	nited Liability Company		
The analoged Articles of	of Amendment and fee(s) are sub	omitted for filing		
The enclosed Afficies of	it Amendment and recess are suc	Sinucu for fining.		
Please return all corresp	oondence concerning this matter	to the following:		
	Ni	Icole Knecht	e\	
		N: (0		
		Firm/Company		
	5525	S Lunay -	Ter	
		Address		
	Inverness	City/State and Zip Code		
	nicole	cinverness @ (	aol com	
For further information	concerning this matter, please c	·	omeanor;	
Nicol	le Knechtel	357 . 4	45 7964	
Name	of Person	at ( <u>352</u> ) <u>4</u> Area Code Dayti	ime Telephone Number	
Enclosed is a check for	the following amount:			
Z \$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 Addro Registration		Street Address: Registration Section		
_	Corporations	Division of Co		
P.O. Box 63		The Centre of		
Tallahassee,	FL 32314	2415 N. Monr	roe Street, Suite 810	

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TUSTING HOME REPAIRO240CF-29 AH 11: 22

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

The Articles of Organization for this Limited Liability Company  Florida document number	were filed on $8$	16 2024 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office		and and a the grown of the grown white
agent and/or the new registered office address here:	address on our rec	orus, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
THE WINDS CONTROL OF THE PARTY	Enter Florid	a street address
THE WINDS CONTROL OF THE PARTY		a street address, Florida Zip Code

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
MGR	Justin Knechtel	5525 S. Luray Terr	<b>%</b> Add
		Inverness, FL. 34452	
			□Change
		·	□Add
			□Remove
			□Change
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<u>.</u>	<del></del>		□Add
			□Remove
			□ Change

## Page 2 of 3

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
(If an e Note	ctive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	d 10/25/2024
	Meal Xnichtel
	Signature of a member or authorized representative of a member
	Nicole Knechtel
	Trad to adjust upon Giorna

Page 3 of 3