

L24 000392443
Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : IDEAS CARVAJAL LLC
Account Number : I20220000006
Phone : (321)333-5565
Fax Number : (407)565-5637

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

Email Address: _____

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TALLAHASSEE, FL
FLORIDA DEPARTMENT OF STATE

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BATHS CRAFT RENOVATIONS & MORE LLC**

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BATHS CRAFT RENOVATIONS & MORE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JEISSON DANILO MEDINA FLORES

Name of Person

BATHS CRAFT RENOVATIONS & MORE LLC

Firm/Company

4661 CASON COVE DR APT 1912

Address

ORLANDO, FL 32811

City/State and Zip Code

INFO@GOALBRIDGE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEISSON DANILO MEDINA FLORES

407 218-3098
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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

SECRETARY OF STATE
TALLAHASSEE, FL

2024 SEP 12 PM 2:46

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BATHS CRAFT RENOVATIONS & MORE LLC

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

The Articles of Organization for this Limited Liability Company were filed on 09/09/2024 and assigned
Florida document number L24000392443.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARIANO MENDEZ	8088 LAUREATE BLVD	<input checked="" type="checkbox"/> Add
		ORLANDO FL, 32827	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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CLERK OF DISTRICT COURT
TALLAHASSEE, FL

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CLERK OF DISTRICT COURT
TALLAHASSEE, FL.

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2024 SEP 12 PM 2:46
U.S. DISTRICT COURT
SOUTHERD DISTRICT OF FLA.
TALLAHASSEE, FL.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Jesus Daino Medina Flores
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00