La4000450717

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	f Status
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Special Instructions to	Filing Officer:	
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11/25/24--01020--027 **25.00

2024 NOV 25 PM 3: 13
SECRETARY OF STATE

COVER LETTER

					
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	indence concerning this matter	to the following:			
	Anthony Alfonso				
		Name of Person			
	TAG HOME & POOL CA	RELLC			
		Firm/Company			
	6203 BAY CLUB DR APT 1				
		Address			
	FORT LAUDERDALE FLORIDA 33308				
		City/State and Zip Code			
	anthonyalfonso.j@gmail.co			26 SE	
	E-mail address: (to be used for future annual report notif	ication)	TALLA SECKEN VALVE VALV VALV	1200 4
For further information of	oncerning this matter, please ca	all:		14. 2.00 3.00 3.00 3.00 3.00 3.00 3.00 3.0	1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1
Anthony Alfonso		941 928-4744 at ()		25 PM 3: ANY OF ST NHASSEE,	مختم. إ
Name o	f Person		: Telephone Number	OF ST	
				: 13 TATE FL	
Enclosed is a check for the	ne following amount:			į · ·	
■ \$25,00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate of Certified Contact (additional contact)	of Status &	

Mailing Address:

TO:

Registration Section

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

TAG HOME & POOL CARE LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lii	Company as it now appears on our records.) mited Liability Company)	
	npany were filed on 10/23/24	and assigned
Florida document number 1.240004.30/17		
This amendment is submitted to amend the following:		
orida document number 1.24000450717 It is amendment is submitted to amend the following: 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 "LLC." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
	-	
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		SE SE
		<u> </u>
		24 4 3
B. If amending the registered agent and/or registered of	ffice address on our records, enter th	e name of the new registered
agent and/or the new registered office address here:		
		Ho w
Name of New Registered Agent:		
New Registered Office Address:		111
New Negistered Office Address.	Enter Florida street address	
	. Flor	ida
	, F101	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 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
Manager	Anthony Jose Alfonso	6203 Bay Club Drive Apt 1	
		Fort Landerdale Florida 33308	□Remove
			□Add
			□ Remove
			□Add
			EORETAFI TAILLAH
			2024 January 25 gpM 3: 13 SECONSTANTION OF SAMTE TAILLAHASSEE FL
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			□Change
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fan effective date is l Note: If the date is	other than the date listed, the date must be s nserted in this block over date on the Depart	specific and car does not mee	t the applical	date of filing ole statutory	or more than filing requi	90 days afte	onal) r tiling.) F is date w	riesiração El Ti SCO	2 60 ၄ ,020 fisted as ယ
record specifies a d is filed.	delayed effective dat	e, but not an	effective tin	nc, at 12:01 a	i.m. on the c	arlier of: (o) The	90th day	after the
November I	20th		2024	_·					
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Filing Fee: \$25.00