## L24000460388

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## **COVER LETTER**

Registration Section

**Division of Corporations** 

):

	ION REMODELING LLC Name of Lim	ited Liability Company	
e enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
ease return all correspo	ondence concerning this matter	to the following:	
	CARLOS U BARAHONA		
		Name of Person	
		Firm/Company	<del></del>
	1720 NW NORTH RIVER	R DRIVE APT 408	<del></del>
	MIAMI, FL 33125	. Toure so	
	bestoremodeling@gmail.co	City/State and Zip Code	
or further information c	E-mail address: to oncerning this matter, please c	to be used for future annual report notif all:	ication)
'ARLOS U BARAHONA GUZMAN		at ( 305 ) 2440904 Area Code Daytime	*** 1 1 2 1
iclosed is a check for t	f Person  ne following amount:	Area Code Daytime	r reiepnone Number
■ \$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	<u>s:</u> Section	Street Address: Registration Sec	etion SECTION NOV 18 Progrations allahassee

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

BEST OPTION REMODELING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) he Articles of Organization for this Limited Liability Company were filed on  $\frac{10/30/2024}{}$ and assigned orida document number <u>L24000460388</u> ais amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: te new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." nter new principal offices address, if applicable: Princip<u>al office address MUST BE A STREET ADDRESS)</u> nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office address on our records, e<u>nter th</u>e na<u>me of the</u> new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ew Registered Agent's Signature, if changing Registered Agent; hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am fifth liar with and ecept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is cing filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability impany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agents

amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person-being added</u> <u>removed from our records</u>:

GR = Manager

MBR = Authorized Member

<u>tle</u>	<u>Name</u>	Address	Type of Action
MBR_	YANINA ANDREA RODRIGUEZ	55 NE 5TH ST APT 3913	■Add
		MIAMI, FL 33132	□ □Remove
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tive date, if other th	date must be specific	and cannot be price	or to date of filing	or more than 90 c	_ (optional)	) Pursuant to	a 605.020 s Herad a
: If the date inserted in ment's effective date o	n the Department of	of meet the approach of State's record	icable statutory is.	Hunk tedaneur		_	
ord specifies a delayed filed.	effective date, but	not an effective	time, at 12:01 a	.m. on the earli	er of: (b) Th	<b>3</b> e 9 <u>0</u> 46 day ====================================	AON 1/28
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	Signatury o	of a member or aut	thorized represent	ative of a membe	1	₽Ħ	<del> </del> : 38

Filing Fee: \$25.00