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TALLAHASSEE, FLORIDA

J. Stivers OCT 16 2013

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **BRICK WALL REMODELING 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:

**GERMAN M CASTRO DE PAZ**

Name of Person

**BRICK WALL REMODELING LLC**

Firm/Company

**888 S. DOUGLAS ROAD, #804**

Address

**CORAL GABLES, FL 33134**

City/State and Zip Code

**german\_castrodp@hotmail.com**

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

For further information concerning this matter, please call:

**German M Castro de Paz**

Name of Person

at **(305) 615-0882**

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/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

13 OCT 15 4:11:05  
RECEIVED  
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32301

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

**BRICK WALL REMODELING 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 9/11/2013 and assigned  
Florida document number L13000128457.

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 end with 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)**

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CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

**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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	GERMAN M CASTRO DE PAZ	888 S. DOUGLAS ROAD # 804	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Remove
MGR	GERMAN M CASTRO DE PAZ	888 S. DOUGLAS ROAD # 804	<input checked="" type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
MGR	JENNIFER CASTRO BALDIVIESO	888 S. DOUGLAS ROAD # 804	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Remove
MGRM	JENNIFER CASTRO BALDIVIESO	888 S. DOUGLAS ROAD # 804	<input checked="" type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
MGR	CHRISTIAN CASTRO BALDIVIESO	888 S. DOUGLAS ROAD # 804	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Remove
MGRM	CHRISTIAN CASTRO BALDIVIESO	888 S. DOUGLAS ROAD # 804	<input checked="" type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

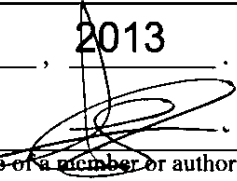
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Dated **OCTOBER 9**, **2013**

  
Signature of a member or authorized representative of a member

**GERMAN M CASTRO DE PAZ**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

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U.S. DEPARTMENT OF JUSTICE