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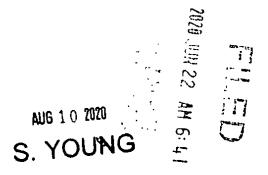
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COVER LETTER

Registration Section Division of Corporations

TO:

DIAMOND SUBJECT:	PAVERS AND REPAIRS LI	.c	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	EDUARDO F PACHECO		
		Name of Person	
		Firm/Company	
	306 WEST CORNELIUS	CIRCLE	
		Address	
	SARASOTA, FL 34232		
		City/State and Zip Code	
	yani.alliedservices@gmail.c		
For further information c	oncerning this matter, please c	to be used for future annual report not	meanony
YANI DA SILVA		941 404-7413 at ()	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for th	ne following amount:		
Ş \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S	Section	Street Address: Registration Se	
Division of C P.O. Box 632	· · · · · ·	Division of Co The Centre of	- -
Tallahassee, I			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIAMOND PAVERS AND REPAIRS ELC		. 97
(Name of the Limited Liability Company as (A Florida Limited Liabil	s it now appears on our record lity Company)	<u>s.</u>)
		N man
The Articles of Organization for this Limited Liability Company wer	e filed on 01/07/2019	and assigned
Florida document number L.19000008921		
		ف من من
This amendment is submitted to amend the following:		F2
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 C	ompany," 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 addr	ress on our records, <u>enter</u>	the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
		
New Registered Office Address:	Enter Florida street addres	
	Enter Pioriaa street adares	3
 		orida

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARCOS PEREIRA ROCHA	100 SIGNAL POINTE APT #207	■Add
		SARASOTA, FL 34232	□Remove
			☐Change
			□Add
			□Remove
			Change
			🗀 Remove
			□Add
			□Remove
			☐ Change
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			□Add
			□Remove
			□Change

lune 17th 2020			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
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