L07000008135

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Cashioso Lina), Hamile,				
(Document Number)				
Certified Copies Certificates of Status				
Consideration to Eiline Office				
Special Instructions to Filing Officer:				
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EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: SALAZAR MASONRY OF GADSDEN LLC

(Name of Limited Liability Company)

	(Name of Emi	ned Blacking Company)	
	Amendment and fee(s) are sub	•	OS FAIR SO PA 2
Please return all corresp	ondence concerning this matter	to the following:	S. Co.
	RON BENFIELD		To the second
		(Name of Person)	
		(Firm/Company)	
	58 SIOUX CIRCLE		
		(Address)	
	HAVANA, FL 32333		
		(City/State and Zip Code)	
For further information	concerning this matter, please c	all:	
RON BENFIELD		at (850) 539-5171	
(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check for t	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SALAZAR MASONRY OF GADSDEN LLC (Name of the Limited Limitary Co	nmnany as it now annears on our	records)
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ited Liability Company)	100143.
The Articles of Organization for this Limited Liability Com	npany were filed on JANUARY 2	23, 2007 and assigned
Florida document number L07000008135		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	d liability company here:	
The new name must be distinguishable and end with the words '"L.L.C."	"Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		400
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		Service Services
(Mailing address MAY BE A POST OFFICE BOX)		
	 	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	/D . EI	
	`	ida street address)
	(City)	, Florida(Zip Code)
	(0.1.9)	(Lip Couc)

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 Type of Action Title Title <u>Address</u> **Name** JESUS GERARDE ALCALA GA MGRM **■** Add 756 S SIKES ST Remove QUINCY, FL 32351 MGRM JORGE LOPEZ 756 S SIKES ST _ Add QUINCY, FL 32351 ■ 7 Remove MGRM **NELSON CARTEGENA** ■ Add 756 S SIKES ST **QUINCY, FL 32351** Remove MGRM JOSE MOURICIO SANTOS 756 S SIKES ST ■ 🗸 Add **QUINCY, FL 32351** ■ Remove ☐ Add Remove _ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JANUARY 28 2009 Signature of a member or authorized representative of a member

Typed or printed name of signee

RON BENFIELD

Page 2 of 2

Filing Fee: \$25.00