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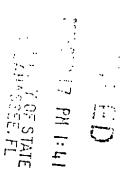
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COVER LETTER

	Registration So Division of Co								
SUBJEC		& Paver, LLC							
SUBJEC		Name of Lin	nited Liability Company						
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.						
Please ret	urn all correspo	ondence concerning this matter	to the following:						
		Sulay Garcia							
			Name of Person						
		Ayala Law PA							
			Firm/Company						
		2490 Coral Way, 4th floor	7						
			Address						
		Miami, FL 33145							
			City/State and Zip Code						
		sgarcia@ayalalawpa.com							
For furthe	r information c	E-mail address: (concerning this matter, please c	to be used for future annual reall:	eport notification)					
Sulay Ga	rcia			-2208					
	Name o	f Person	at () Area Code	Daytime Telepho	one Number				
Enclosed	is a check for tl	he following amount:							
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enctor		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
_	Mailing Addres		Street Ade						
Registration Section Division of Corporations				ion Section of Corporation	ons				
	P.O. Box 632		The Centre of Tallahassee						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

Milestone & Paver, LLC		
(Name of the Lim	nited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) pany)
The Articles of Organization for this Limited	Liability Company were filed o	on 01/18/2023 and assigned
Florida document number 1.08000114585		
This amendment is submitted to amend the fol	llowing:	
A. If amending name, enter the new name	of the limited liability compa	iny here:
The new name must be distinguishable and contain the	words (Limited Liability Company,	Tithe designation [LLC] for the abbreviation [L.L.C.]
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
		50 1
Enter new mailing address, if applicable:		NA 17
(Mailing address MAY BE A POST OFFICE BOX)		(SQ P 13)
	-	AII 4
B. If amending the registered agent and/or agent and/or the new registered office address.		our records, enter the name of the new registe
Name of New Registered Agent:	Ayala Law PA	
New Registered Office Address:	2490 Coral Way, 4th floor	
	Ente	er Florida street address
	Miami	, Florida 33145
	City	Zip Code

New Registered Agent 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 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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Change
			□Add
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