

L14 0000046852

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : RC TAX SERVICE LLC
Account Number : I20140000083
Phone : (407)932-0040
Fax Number : (407)520-5473

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN D&L DRYWALL SERVICE LLC

Certificate of Status	0
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COVER LETTER

(H160001630153)

**TO: Registration Section
Division of Corporations**

SUBJECT: D&L DRYWALL SERVICE 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:

LILIAN GARCIA RAMOS

Name of Person

D&L DRYWALL SERVICE LLC

Firm/Company

1610 WOODBAY CT

Address

KISSIMMEE, FL 34744

City/State and Zip Code

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

For further information concerning this matter, please call:

LILIAN GARCIA RAMOS

786

567-1826

Name of Person

at (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

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

(H160001650133)

D&L DRYWALL SERVICE 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 03/21/2014 and assigned
Florida document number L14000046852.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1610 WOODBAY CT

(Principal office address MUST BE A STREET ADDRESS)

KISSIMMEE FL 34744

Enter new mailing address, if applicable:

1610 WOODBAY CT

(Mailing address MAY BE A POST OFFICE BOX)

KISSIMMEE FL 34744

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:

1610 WOODBAY CT

Enter Florida street address

KISSIMMEE

City

Florida34744

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 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

(H16 0001650153)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	IGOR AVILES	527 VILLA DEL SOL CIR.	<input type="checkbox"/> Add
		APT 105	<input checked="" type="checkbox"/> Remove
		ORLANDO, FL 32824	<input type="checkbox"/> Change
MGRM	LESLIE GRANDA	1610 WOODBAY CT	<input checked="" type="checkbox"/> Add
		KISSIMMEE FL 34744	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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16

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (416 00016 & 0153)

ARTICLE IV: ADDRESS OF PERSON AUTHORIZED TO MANAGE LLC

CHANGE ADDRESS OF THE FOLLOWING MEMBERS:

MGR: DARIEEN HERNANDEZ

NEW ADDRESS: 1610 WOODBAY CT

KISSIMMEE, FL 34744

MGRM: LILIAN GARCIA RAMOS

NEW ADDRESS: 1610 WOODBAY CT

KISSIMMEE, FL 34744

FILED
16 JUL 11 AM 10:47
CLERK OF COURT
JULIA A. SPECTOR

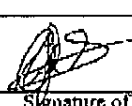
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JULY 7TH, 2016



Signature of a member or authorized representative of a member

LILIAN GARCIA RAMOS

Typed or printed name of signee