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(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	ne)
(Docui	ment Number)	
		/
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	
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Frank

COVER LETTER

TO: Registration Secti Division of Corpo	on rations	•	
DRYWALL J	A PORTILLI LLC		
SUBJECT:		Liability Company	
			200
The enclosed Articles of A	mendment and fee(s) are submi	tted for filing.	· -
Please return all correspond	dence concerning this matter to	the following:	·- •
	PORTILLO GUEVERA JOH		13 13 15 15
		Name of Person	
	DRYWALL J A PORTILLO	LLC	
		Firm/Company	
	1017 POTOMAC DRIVE		
		Address	
	PENSACOLA FL 32505		
		City/State and Zip Code	
	jorgeenriqueguevara@hotma	il.com	tion)
		o he used for future annual report notifica	
For further information co	oncerning this matter, please ca	11:	
PORTILLO GUEVARA	JORGE E	407 264-1197 at ()	
Name o	f Person	Area Code Daytime T	clephone Number
Enclosed is a check for the \$25.00 Filing Fee	he following amount: \$\Bigsim \$30.00 \text{ Filing Fee & Certificate of Status}	S55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy
		(additional copy is enclosed)	(additional copy is enclosed)
MAII	LING ADDRESS:	STREET/COURIE	R ADDRESS:
Regis	tration Section ion of Corporations	Registration Section Division of Corpora Clifton Building	tions

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRYWALL J.A.PORTILLO LLC				
(Name of the Limited Liability (A Florida	Company as it now appear Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Co. Florida document number <u>L15000126805</u>			and assigned	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limi</u> t	ted liability company h	ere:		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the	designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:				-17
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		ا ها دا	=
			- 35	
Enter new mailing address, if applicable:			AH 11: 3	٧
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi	tered office address o	n our records, enter t	the name of the n	<u>ew</u>
Name of New Registered Agent:				
New Registered Office Address:	Enter Flo	orida street address		
<u>.</u>		, Florida	Zip Code	
	City		лр Соае	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MICHAEL TODD Bunes		
		4491 EDGE WOOD DR	
		MILTON FL, 32583	■ Remove
			Change
AMBR	SANTOS R ANAYA-VEGA		□ Add
		32 W WHITE ST	
		BRENTWOOD, NY 11717	■ Remove
			Change
			
			□ Remove
			Change
			☐ Remove
			□ Change
		□ Remove	
	-	☐ Change	
			□ Remove
			☐ Change

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 12/11/2018

Signature of a member of authorized representative of a member PORTILLO GUEVARA. JORGE E

Typed or printed name of signee

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