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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ITAX GROUP, LLC Account Number : I20140000115 Phone : (813)882-8426 Fax Number : (813)884-0263

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAENZ ARTISTIC MASON SERVICES LLC

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Help

Tallahassee, FL 32314

Registration Section

TO:

## **COVER LETTER**

Division	of Corporatio	ns				
SAE	NZ ARTISTIC	MASON SERVICES	LLC			
SUBJECT:		Name of Lim	ited Liability Company	<u></u>	<del></del> ,	
The enclosed Arti	cles of Amendr	nent and fee(s) are sub-	mitted for filing.			
Please return all e	orrespondence	concerning this matter	to the following:			
	GUI	ERRERO SAENZ, JOS	SUE			
	SAE	ENZ ARTISTIC MASO	Name of Person ON SERVICES LLC	<del></del> - <del></del>		
	523	I 3RD AVE N	Firm/Company	<del></del>		
	ST.	PETERSBURG, FL 33	Address 3710		<u>.</u>	
	josuc	@sacnzmasonry.com	City/State and Zip Code			
For further inform	ation concernir	ng this matter, please ca			··· <b>'</b>	19 JUL
GUERRERO SAI	ENZ, JOSUE			12-8838		L 29
	Name of Person	· <del></del>	at (), _ Area Code	Daytime Tele	phone Number	
Enclosed is a chec	k for the follow	ving amount:				் பூ •்
■ \$25.00 Filing		0.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee Certified Copy (additional copy is en		Certified C	of Status &
	MAILING AE Registration Se Division of Co P.O. Box 6327	ction	Registra Division	T/COURIER A tion Section of:Corporation Building		

Division of:Corpo Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAENZ ARTISTIC MASON SERVICES LLC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on our records.)	· <del></del>
The Articles of Organization for this Limited Liability Compa	ny were filed on 03/16/2017	and assigned
Florida document number L17000061518		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li.	ability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u> .	<del></del>
(Principal office address MUST BE A STREET ADDRESS)		
		<del></del>
Enter new mailing address, if applicable:		, <u></u>
(Mailing address MAY BE A POST OFFICE BOX)		······································
B. If amending the registered agent and/or registered	office address on our records, ente	the name of the ne
registered agent and/or the new registered office address h	ere:	JUL
		29
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		= : - : (o
	Enter Florida street address	Oi.
	, Florida	्रं <b>का</b> ————————————————————————————————————
<del></del>	City	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 adde or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	Name	<u>Address</u>	Type of Action
MGR	GIDIBMA, DANIEL JAMES	5231 3RD AVE N ST. PETERSBURG, FL 33710	
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to e.  If the date inserted in this block does not meet the applicable ument's effective date on the Department of State's records.	date of filing or more than 90 c statutory filing requirer	days after filing.) Pursus nents, this date will no	int to 6 ot be li
record specifies a delayed effective date, but not a he 90th day after the record is filed.	n effective time, at	12:01 a.m. on the	e ea
od July 29 , 2019			
Supplure of a member or authoriz	ed representative of a memi	лет	
Salar to a menant in annicon			
GUERRERO SAENZ, JOSUE			

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