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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TIMELINE BUSINESS CENTER LLC

Account Number : I20150000034

Phone

: (239)344-7417

Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DIRECT GRANITE COUNTERTOPS LLC

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Corporate Filing Menu

FEB 2 4 2020

2020-02-21 00:55:16 (GMT)

18883447262 From: Ismael Cardoso

ARTICLES OF AMENDMENT ·TO

ARTICLES OF ORGANIZATION **OF**

DIRECT GRAN!TE CO	UNTERTOPS LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L17000262117	ere filed on 12/27/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ty company here:	
PACIFIC GRANITE COUNTERTOPS LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		2 2
(Mailing address MAY BE A POST OFFICE BOX)		720
•		2 2
B. If amending the registered agent and/or registered office ad	dress on our records, enter the nan	ne of the new registered
agent and/or the new registered office address here:	·	34 17
	~	ූ
Name of New Registered Agent:	-	
Tulino de l'acceptante de la companya de la company		-,
New Registered Office Address:	Enter Florido street address	
	·	
•	, Florida	Zip Code
	City	. Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and I am covided for in Chapter 605, F.S. Or	familiar with and , if this document is

If Changing Registered Agent, Signature of New Registered Agent

To Page 3 of 4

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			🗆 Add
			□ Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
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			Change
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Note:	ive date, if other than the date of filing: [Sective 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 605.020. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
e reco rd is f	rd 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 led.
Dated	$\mathcal{A}_{\mathcal{A}}$
	Signature of a thember or authorized representative of a member

Filing Fee: \$25.00