L180000 76479

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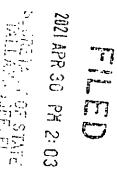


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COVER LETTER

TO:	Registration Se Division of Cor						
eun it		CONSTRUCTION COMPA	NY OF LAKELAND LLC				
ZORTE	Name of Limited Liability Company						
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all correspo	endence concerning this matter	to the following:				
		ZURIEL ORLANDO					
			Name of Person				
		THE ROCK CONSTRUC	TION COMPANY OF LAKELAN	ID LLC	••	~>	
		 -	Firm/Company		— ; :- <u>:</u> ,	ว์นิ21	
		4141 KATHLEEN ROAD)		(F-8) (P-7)	2021 APR 30	epro-
		·	Address				ē - :
		LAKELAND, FL 33810				PK 2:	
			City/State and Zip Code			2: 03	_
		READP@CCHRP.COM			_	CC)	
			(to be used for future annual report not	ification)			
For fur	ther information c	oncerning this matter, please c	eall:				
ZURIE	EL ORLANDO		813 7541713 at ()				
	Name o	f Person		e Telephone Num	ber	-	
Enclos	ed is a check for the	ne following amount:					
S \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	Filing Felicate of Sicate Opy Sicate Copy Sical Copy is	tatus &	
	Mailing Addres		<u>Street Address:</u> Registration Se	ection			
	Registration S Division of C		Division of Co				
	P.O. Box 632	27	The Centre of		. Q1A		
	Tallahassee,	rl 32314	2415 N. Monro	ic succi, sull	010		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE ROCK CONSTRUCTION COMPANY OF		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our rec ited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Comp Florida document number L18000076479	oany were filed on 03/26/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
ZURI'S MARKETING LLC		
The new name must be distinguishable and contain the words "Limited l	Liability Company," the designation "I	LLC" or the abbre tiation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	C) t
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	lice address on our records, <u>en</u>	ter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street ad	dress
		, Florida
	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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record specifies a delayed effective date, but not an effective date, but not an effective date.	ective time,	at 12:01 a.r	n, on the ca	rlier of: (1	o) The	90th da	iy after the
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ated APRIL 27 , 2021		d representat	ive of a mem	her			 .

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