L18000077585

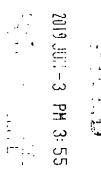
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JUN 18 2019

COVER LETTER

	Registration Se Division of Cor			
SUBJEC		MASONRY LLC		
OUBJEC	· · · · · · · · · · · · · · · · · · ·	Name of Lin	nited Liability Company	<u> </u>
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	indence concerning this matter	to the following:	
		HORTENSIA RODRIGUE	Z TORRES	
		MANATE MASONRY LLC	Name of Person	
		850 BELL BLVD S	Firm/Company	
		LEHIGH ACRES, FL 3397	Address 4	
		ORTERODRIGUEZ7472@0	City/State and Zip Code GMAIL.COM	
		E-mail address: (to be used for future annual report notif	ication)
For furthe	er information e	oncerning this matter, please c	all:	
HORTE	NSIA RODRIG	UEZ TORRES	262 748-7783	
	Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	0 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)
	MAILI	NG ADDRESS:	STREET/COURI	ER ADDRESS;

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF



2019 JUN -3 PM 3:55

MANATE MASONRY 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	03/26/2018	and assigned
Florida document number L18000077585			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company	here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company." t	he designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:	<u>'e</u> :	<u></u>	
New Registered Office Address:			
		Florida street address	
	Citr	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>-</u>		enp same
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance provided for i	of my duties, and La n Chapter 605, F.S.	im familiar with and Or, if this document is
If Chai	nging Registered	Agent, Signature of Nev	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> HUMBERTO PORCAYO	Address 850 BELL BLVD	Type of Action
MGR			= Add
		LEHIGH ACRES . FL 33974	□ Remove
			Change
			□ Remove
			Change
		<u></u>	□ Remove
			□ Change
			
			Change
			Remove
•			☐ Change
			□ Add
			☐ Remove
			Change

	<u> </u>				
					
				<u> </u>	
			-		
					
	(05/29/2019			
E. Effective date, if other t (If an effective date is listed, the Note: If the date inserted document's effective date	han the date of filing: _e date must be specific and car in this block does not mee	inot be prior to date t the applicable s	of filing or more than tatutory filing requi	(optional) 190 days after filing.) Pursu rements, this date will m	iant to 605,0207 (3)(b of be listed as the
If the record specifies a ((b) The 90th day after	delayed effective dat the record is filed.	e, but not an	effective time,	at 12:01 a.m. on th	ne earlier of:
05/29 Dated	·	2019			
		j*	7 Tomes		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00