## L18000104475

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2019 FEE -7 F2 3: 50

FEB 1° 333 T. LEWISLOY

## **COVER LETTER**

SUBJECT:	Concrete Co	osmetics LLC			
SUBJECT		Name of Lim	ited Liability Company		
The enclosed	l Articles of z	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspor	ndence concerning this matter	to the following:		
		Linda Gomez			
			Name of Person .	<del></del>	
			Firm/Company	<del></del>	
Name of Person					
			Address		
		Sarasota, FL 34232		•	
		alonsoroberto050@gmail.com			
		E-mail address: ()	to be used for future annual report notific	cation)	
For further in	nformation co	ncerning this matter, please ca	ulf:		
Linda Gome	z				
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a	check for the	e following amount:			
□ \$25.00 F	iling 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)	

MAILING ADDRESS:

TO:

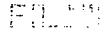
Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Concrete Cosmetics LLC

2019 FEB - 7 🏳 3: 50

(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  $\frac{4/23/2018}{2}$ Florida document number <u>L 18000104475</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_. Florida \_\_\_ City

## 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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Robert S. Alonso	304 Golden Sands Drive Sarasota, FL 34232	
			Remove
			Change
			□ Remove
			☐ Change
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Add
			□ Remove
		<del></del>	☐ Change
	<del></del>		Add
		<del></del>	☐ Remove
			☐ Change

,	
	** ** ** ** ** ** ** ** ** ** ** ** **
,	
Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
See	February 5 / 2019
Dated	
	signature of a member or authorized representative of a member
	Roberto Akansa

Page 3 of 3

Filing Fee: \$25.00