418000127796

(Re	equestor's Name)	
(Ac	idress)	
(Δ.	ddress)	
(/ 10	101033)	
(Ci	ty/State/Zip/Phone #/)
,	,	
	—	—
☐ PICK-UP	☐ WAIT	MAIL
		
(Bu	usiness Entity Name)	
/D-	ocument Number)	,. <u></u>
(DC	ocument ivumber)	
Certified Copies	Certificates of	Status
Special Instructions to	Filiag Officer	
Special instructions to	Fining Onicel.	
	J DENNIS	

	JAN 1 1 2023	
, ስለ		
Nicce		
441/		
	Office Use Only	



800395479658

10/17/22 --01033 --011 **55.00

2022 OCT 17 PM 4: 21

SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C			-
	tone LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Federico Gomez		
		Name of Person	
	Derico Stone LLC		
		Firm/Company	
	6241-105th Ter		
		Address	
	Pinellas Park, FL 33782		
		City/State and Zip Code	
	gomez.granite@outlook.cor E-mail address: ()	n o be used for future annual report notif	ication)
For further information	i concerning this matter, please ca	•	,
Danielle Gomez		727 422-8667	
Nam	e of Person		: Telephone Number
Enclosed is a check fo	r the following amount:		
☐ \$25.00 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)
P.O. Box 6	n Section Corporations	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited</u> (A	Liability Company as It now appears on or Florida Limited Liability Company)	<u>ar records.</u>)
The Articles of Organization for this Limited Liab Florida document number <u>L18000127796</u>	pility Company were filed on May 22	2018 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
Gulf Coast Granite Fabricators LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company." the designate	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	<u> </u>	
	-	
0.16 1: 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		a antaretha marro of the marron mode
B. If amending the registered agent and/or regigent and/or the new registered office address		s, enter the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Derico Stone LLC

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
			□Add
			Remove
			Change
			□Add
			□Remove
			Remove
			Change
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Remove
			C'hange

,	
-	
-	
•	
-	
Note:	tive date, if other than the date of filing:
e recor rd is ti	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 filed.
Dated	<u> 1140ber 19</u> , <u>2022</u> .
	Keiner of the
	Signature of a member or authorized representative of a member