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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates o | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: | Registration Sec Division of Corp | | | |
|----------------------|--------------------------------------|--|--|---|
| 011514 | | GRANITE KITCHEN & BATE | H, LLC | |
| SUBJE | SCI: | Name of Lim | ited Liability Company | |
| The en | closed Articles of A | Amendment and fee(s) are sub- | mitted for filing. | |
| Please | return all correspor | ndence concerning this matter | to the following: | |
| | | JESUS I. ERIVES MEZA | A | |
| | | | Name of Person | |
| | | MASTER GRANITE KIT | CHEN & BATH, LLC | |
| | | | Firm/Company | |
| | | 5086 SE 102ND PLACE | , UNITE D-11 | |
| | | | Address | |
| | | BELLEVIEW, FL 34420 | | |
| | | | City/State and Zip Code | |
| | | almanzatax1@yahoo.com | | |
| | | E-mail address: (| to be used for future annual report notific | cation) |
| For fur | ther information co | oncerning this matter, please ca | all: | |
| JESUS I. ERIVES MEZA | | 352 653-7866 | | |
| | Name of | Person | Area Code Daytime | Telephone Number |
| Enclos | ed is a check for th | e following amount: | | |
| □ \$2 | 5.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MASTER GRANITE KITCHEN & BATH, 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 06/22/2018 ___ and assigned Florida document number L18000153370 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 nameof 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

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 |
|--------------|-----------------------|----------------------|----------------|
| MGR | ELVIN BANEGAS VILLEDA | 40 JUNIPER TRAIL RUN | |
| | | OCALA, FL 34480 | Remove |
| | | | □ Change |
| MGR | JORGE E. ARTEAGA DIAZ | 1150 LEE STREET | |
| | | LEESBURG, FL 34748 | Remove |
| | | | Change |
| | | | |
| | | | □ Remove |
| | | | ☐ Change |
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| ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De | be specific and cannot book does not meet the | applicable statutory | or more than 90 da filing requiremen | (optional) ys after filing.) Purs ts, this date will | suant to 60 not be lis | 05.020 sted a |
| e record specifies a delayed The 90th day after the reco | | ut not an effecti | ive time, at 12 | :01 a.m. on t | he ear | lier o |
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| AUGUST 9TH ated | ¹ | | | | | |
| ated AUGUST 9TH | I Friver Signature of a member of | | tative of a member | | | |

Page 3 of 3

Filing Fee: \$25.00