

L18000218732

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(Address)

(Address)

(City/State/Zip/Phone #)

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OCT 01 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GRANITE SERVICE LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOBEL REYES

Name of Person
GRANITE SERVICE LLC

Firm/Company
337 BOTTONWOOD DRIVE

Address
KISSIMMEE , FL 34743

City/State and Zip Code
fidelcruz353@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FIDEL CRUZ	407	520-2158
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for 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)

MAILING ADDRESS:
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**

GRANITE SERVICE 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 09/24/2018 and assigned
Florida document number L18000218732.

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 name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

FIDEL CRUZ

New Registered Office Address:

337 BUTTONWOOD DRIVE

Enter Florida street address

KISSIMMEE

City

Florida 34743

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>	<u>Address</u>	<u>Type of Action</u>
MBR	JOBEL REYES	337 BUTTONWOOD DRIVE	<input type="checkbox"/> Add
		KISSIMMEE , FL 34743	<input checked="" type="checkbox"/> Remove
		337 BUTTONWOOD DRIVE	<input type="checkbox"/> Change
MBR	FIDEL CRUZ	KISSIMMEE , FL 34743	<input checked="" type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

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SEP 24, 2018

E. Effective date, if other than the date of filing: _____ (optional)


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated SEPTEMBER 24 2018



Signature of a member or authorized representative of a member

FIDEL CRUZ

Typed or printed name of signee

RESOLUTION:
ACCEPT DIRECTOR'S RESIGNATION

RESOLVED, that the resignation of JOBEL REYES as a member of the Board of Directors of the Corporation as evidenced by a resignation letter to the Corporation, dated SEPTEMBER 24, 2018, is hereby accepted, and the Secretary of the Corporation is hereby instructed to notify JOBEL REYES of the Board's acceptance.

The undersigned hereby certifies that he/she is the duly elected and qualified secretary and the custodian of the books and records and seal of GRANITE SERVICE LLC corporation duly formed pursuant to the laws of the state of FLORIDA and that the foregoing is a true record of a resolution duly adopted at a meeting of the Board of Directors, and that said meeting was held in accordance with state law and the Bylaws of the above-named Corporation on SEPTEMBER 24, 2018, and that said resolution is now in full force and effect without modification or rescission.

IN WITNESS WHEREOF, I have executed my name as secretary and have hereunto affixed the corporate seal of the above-named Corporation this 24th day of September, 2018

A True Record.

Attest.



JOBEL REYES

Resignation

TO: GRANITE SERVICE LLC
337 BUTTONWOOD DRIVE
KISSIMMEE , FL 34743
(407) 935-0093

AND TO: The shareholders thereof

I HEREBY tender my resignation as a director of the Corporation to take effect forthwith.

DATED SEPTEMBER 24, 2018



JOBEL REYES