118000220172

(Requestor's Name)
() ((1))
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700319223997

10/17/18--01003--008 ++25.00

2018 OCT 15 BUID: 27

COVER LETTER

TO:	Registration Sec Division of Corp			
cu'n		GRANITE L.L.C.		
SOR	JECT:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub-	_	
		RAIZA RODRIGUEZ		
		ALAMAR GRANITE L.L	Name of Person .C.	
		1850 WEST 58TH STREE	Firm/Company T	
		HIALEAH, FLORIDA 330	Address	
		MINOTARIO@YAHOO.C	City/State and Zip Code OM	
For fi	urther information ed	E-mail address: (i	to be used for future annual report no all:	tification)
RAIZ	ZA RODRIGUEZ		786 3918002 at ()	
	Name of	f Person	Area Code Daytir	ne Telephone Number
Enclo	osed is a check for th	ne following amount:		
■ S	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

ALAMAR GRANITE L.L.C.			
(Name of the Lim	ited Liability Company as it n (A Florida Limited Liability C	ow appears on our records. Company)	
The Articles of Organization for this Limited	Liability Company were fil	ed on 09/17/2018	and assigned
lorida document number L18000220172			
his amendment is submitted to amend the fol	llowing:		
. If amending name, enter the new name	of the limited liability con	npany here:	
			<u> </u>
ne new name must be distinguishable and contain the	words "Limited Liability Comp	any," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if appli	icable:		<u> </u>
Principal office address MUST BE A STRE	ET ADDRESS)		· 5 71
			
nter new mailing address, if applicable:			54
<u> failing address MAY BE A POST OFFICI</u>	<u></u>		
. If amending the registered agent and egistered agent and/or the new registered of		dress on our records,	enter the name of the n
gistered agent and/or the new registered	office address nere.		
Name of New Registered Agent:	RAIZA RODRIGUEZ		
New Registered Office Address:	1850 WEST 58TH STE	ET ±8	
		Enter Florida street address	•
	HIALEAH	Flor	rida <u>33012</u>
	City		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>	Type of Action
MGR	RAIZA RODRIGUEZ	1850 WEST 58TH STREET HIALEAH,FL, 33012	<u></u> ■ Add
		**************************************	Add
			□ Remove
			Change
			☐ Remove
			Change
			<u></u> Ad d
			Remove—
			☐ Change
			□ Remove
		 	☐ Change
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change

			
			:
-			. g.
			· · · · · · · · · · · · · · · · · · ·
			<u> </u>
			
	 	<u>.</u>	
ffective date, if other than the d'an effective date is listed, the date must book and if the date inserted in this block locument's effective date on the Dep	ck does not meet the applica	able statutory filing requirer	nents, this date will not be listed as
e record specifies a delayed of The 90th day after the recor		t an effective time, at	12:01 a.m. on the earlier of
OCTOBER 5TH	2018	·	
- Car	*		
			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00