

12/14/22 1:55 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L19000036105

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : WHOLE TAX PROFESSIONAL SERVICES, INC.
Account Number : I20200000179
Phone : (786)253-9951
Fax Number : (305)397-1052

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: wholetax@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
G&G DRYWALL PROFESSIONAL LLC

Certificate of Status	0
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C. BRUMBLEY
DEC 21 2022

Electronic Filing Menu Corporate Filing Menu Help

**H22000420755 ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

G&G DRYWALL PROFESSIONAL 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 02-05-2019 and assigned
Florida document number 1:0000036105

This amendment is submitted to amend the following.

A. If amending name, enter the new name of the limited liability company here:

SOFAST MIAMI LLC

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)

17141 SW 91ST ST

MIAMI, FL 33196

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

17141 SW 91ST ST

MIAMI, FL 33196

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:

GILBERTO J BALZA LIRA

New Registered Office Address:

17141 SW 91ST ST

Enter Florida street address

MIAMI,

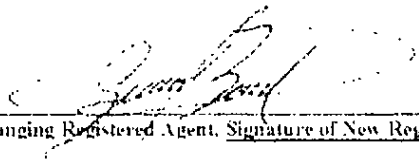
Florida 33196

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

H22000420755

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>
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