

L19000043653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE

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JUL 12 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GUANIMERO TILE 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:

OLGA RAMOS

Name of Person

FREEDOM TAX SERVICE OF SW FL CORP

Firm/Company

12355 COLLIER BLVD STE H

Address

NAPLES, FLORIDA 34116

City/State and Zip Code

OLGARAMOS0524@GMIL.COM

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

For further information concerning this matter, please call:

OLGA RAMOS

239

455-6011

at ()

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

**TO
ARTICLES OF ORGANIZATION
OF**

GUANIMERO TILE 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 02/13/2019 and assigned
Florida document number L19000043653.

This amendment is submitted to amend the following:

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

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)

1709 E WATER AVE

TAMPA, FL 33604

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1709 E WATER AVE

TAMPA, FL 33604

B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here:

Name of New Registered Agent:

FREEDOM TAX SERVICE OF SOUTHWEST FL

New Registered Office Address:

12355 COLLIER BLVD STE H

Enter Florida street address

NAPLES

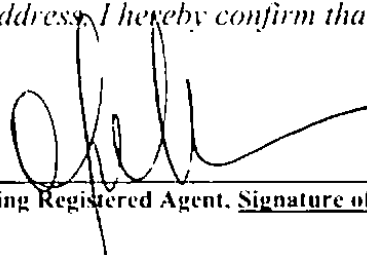
City

Florida 34116

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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of</u>
MGR	PEDRO ALCANTARA	6612 AMBASSADOR DRIVE	<input type="checkbox"/> Add
		TAMPA, FLORIDA 33615	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PEDRO ALCANTARA	1709 E WATER AVE	<input type="checkbox"/> Add
		TAMPA, FL 33604	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECURITY
TAMPA, FL 33604

