

L19 000 107017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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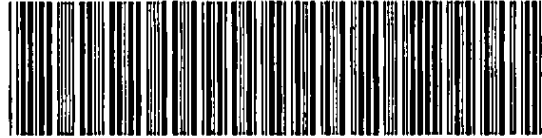
(Business Entity Name)

(Document Number)

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JUL 12 2021

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PAVER PROVISIONS 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:

GERALD D. GONZALEZ

\_\_\_\_\_  
Name of Person

PAVER PROVISIONS LLC

\_\_\_\_\_  
Firm/Company

8079 HUNTERS RIDGE SOUTH

\_\_\_\_\_  
Address

GLEN ST. MARY, FL 32040

\_\_\_\_\_  
City/State and Zip Code

geraldgonzalezbeso@gmail.com

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

For further information concerning this matter, please call:

LORIE T. WEST

904 838-5882  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

PAVER PROVISIONS 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 APRIL 18, 2019 and assigned  
Florida document number L19000107017.

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)

8079 HUNTERS RIDGE SOUTH

GLEN ST. MARY, FL 32040

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8079 HUNTERS RIDGE SOUTH

GLEN ST. MARY, FL 32040

**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: GERALD D. GONZALEZ

New Registered Office Address: 8079 HUNTERS RIDGE SOUTH

*Enter Florida street address*

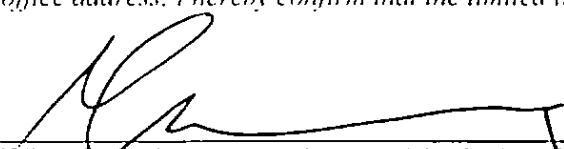
GLEN ST. MARY, Florida 32040

*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>	<u>Type of Action</u>
MGR	GERALD D. GONZALEZ	8079 HUNTERS RIDGE SOUTH	<input checked="" type="checkbox"/> Add
		GLEN ST. MARY, FL 32040	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JESSICA L. GONZALEZ	8079 HUNTERS RIDGE SOUTH	<input checked="" type="checkbox"/> Add
		GLEN ST. MARY, FL 32040	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LEEANN M. BARNES	6810 ODIS YARBOROUGH RD	<input type="checkbox"/> Add
		GLEN ST. MARY, FL 32040	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
COO	CASEY BARNES	6810 ODIS YARBOROUGH RD	<input type="checkbox"/> Add
		GLEN ST. MARY, FL 32040	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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