# 19000114747

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

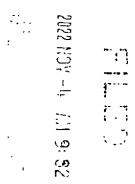
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A. RIVERS JAN 2 5 2023



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### **COVER LETTER**

## Registration Section Division of Corporations

	EREZ TILE, LLC		
JECT:	Name of Lim	ited Liability Company	
enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
se recarr an correspo	machee concerning and	-	
	OSDEL PEREZ		
		Name of Person	
	OSDEL PEREZ TILE, LL	С	
		Firm/Company	
	3227 W PALMETTO ST		
		Address	
	TAMPA, FL 33607		
*1		City/State and Zip Code	
	omarlgarcia@gmail.com		
	E-mail address: (	to be used for future annual report not	(neation)
further information o	concerning this matter, please of	all:	
DEL PEREZ		786 343-0299	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
osed is a check for the	he 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

OSDEL PEREZ TILE, LLC					
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our lability Company)	records.)			
Articles of Organization for this Limited Liability Company vida document number 1.19000116747	vere filed on <u>04/30/2019</u>		a	nd assig	ned
amendment is submitted to amend the following:					
f amending name, enter the new name of the limited liabil	ity company here:				
new name must be distinguishable and contain the words "Limited Liability	y Company," the designation	"LLC" or the	abbreviat	ion "L.L.(	2."
er new principal offices address, if applicable:		<del></del>		_	<del></del>
scipal office address MUST BE A STREET ADDRESS)					
a and address if applicables					
r new mailing address, if applicable:					
ling address MAY BE A POST OFFICE BOX)					
amending the registered agent and/or registered office act and/or the new registered office address here:  Name of New Registered Agent:	idress on our records, g	enter the na	inge of t	he new 1	register
New Registered Office Address:	_		<u></u>	203	
New Registers Office Assessor	Enter Florida street	address , Florida _	• •	2012 NOV	-11
	City	_, riorida _	. Ziji	Code-	1
tegistered Agent's Signature, if changing Registered Agent:			••	₹:	: : }
by accept the appointment as registered agent and agretions of all statutes relative to the proper and complete put the obligations of my position as registered agent as put filed to merely reflect a change in the registered office only has been notified in writing of this change.	performance of my duti rovided for in Chapter	es, and Lar 605, F.S. G	n famili r, if thi:	ar wun s dδcum	ana ent is

If Changing Registered Agent, Signature of New Registered Agent

nending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added emoved from our records:

**Type of Action** 

R = Manager

BR = Authorized Member

<u>Name</u>	<u>Address</u>	Type of Action
LORRAINE GUTIERREZ	3227 W. PALMETTO ST	🖹 Add
	TAMPA. FL 33607	□Remove
		Change
		Remove
		Change
		\ \_Add
		□Remove
		Change
		□Add
		□Remove
		Change
		\ \_Add
		[7].Remove
		Change
		□Add
		□Remove
		🗆 Change

### Page 2 of 3

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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: 1	ve date, if other than the date of filing:  ctive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
۵	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
d _	October 18th 2022. Onder Peren
	Signature of a member or authorized representative of a member
	OSDEL PEREZ  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00