

L19 000249548

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

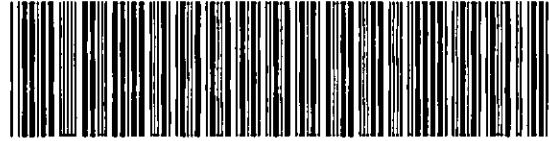
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

2022 OCT -6 AM 9:37

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INFINITY MASONRY SERVICES 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:

DAYANA K. LOPEZ BASURTO

Name of Person

DKL CONSULTANT LLC

Firm/Company

1423 PONCE DE LEON BLVD.

Address

CORAL GABLES, FL 33134

City/State and Zip Code

INFO@DKLCONSULTANT.COM

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

For further information concerning this matter, please call:

DAYANA K. LOPEZ BASURTO

786

4288382

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 SEP -6 AM 9:19

September 22, 2022

DAYANA K LOPEZ BASURTO
DKL CONSULTANT LLC
1423 PONCE DE LEON BLVD
CORAL GABLES, FL 33134

SUBJECT: INFINITY MASONRY SERVICES LLC
Ref. Number: L19000249548

We have received your document for INFINITY MASONRY SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

ABRAHAN's Last Name is not complete.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 222A00021191

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

FILED

2022 OCT -6 AM 9:37

INFINITY MASONRY SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/03/2019 and assigned
Florida document number L19000249548.

This amendment is submitted to amend the following:

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

N/A

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City, **Florida**, 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	ABRAHAN HERRERA RIVERA	10550 WEST STATE ROAD 84 LOT 377,	<input type="checkbox"/> Add
		DAVIE, FL 33324.	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMGR	ABRAHAN HERRERA RIVERA	10550 WEST STATE ROAD 84 LOT 377,	<input checked="" type="checkbox"/> Add
		DAVIE, FL 33324.	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMGR	LUZ MARINA RIVERA	19900 NW 37 AVE LOT C97,	<input type="checkbox"/> Add
		MIAMI GARDENS, FL 33029.	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LUZ MARINA RIVERA	19900 NW 37 AVE LOT C97,	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS FL 33029.	<input 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
			<input type="checkbox"/> Change

2022 OCT -6 AM 9:37
SECURITY 203141
TALLAHASSEE, FL

2022 OCT -6 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FL

מחזור

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00