# L19000266926

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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NOV 18 2021 I ALBRITTON

### **COVER LETTER**

	stration Se ion of Cor				e.
SUBJECT:		Concrete, LLC			,
50 <b>50</b> 50			mited Liability Company	<u> </u>	
The enclosed A	Articles of A	Amendment and fee(s) are su	bmitted for filing.		
Please return a	ll correspo	ndence concerning this matte	r to the following:		
		Christy Satterfield			
			Name of Person	<del></del>	<del></del>
		All About Concrete LLC			
			Firm/Company	·	
		5936 Ashton Wood Circle	er		
			Address		<del></del> _
		Milton,FL 32570			
			City/State and Zip Code		
		christyann2013@yahoo.com			
For further info	rmation co	E-mail address:	to be used for future annual all:	report notification	)
Christy Satterfie				5-6907	
	Name of l	Person	at () Area Code	Daytime Teleph	none Number
Enclosed is a ch	eck for the	following amount:			
□ \$25.00 Filin		■ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	k C	\$60.00 Filing Fee,
		Certificate of Status	Certified Copy (additional copy is encl	osed)	Certificate of Status & Certified Copy (additional copy is enclosed
	Address:	ction	Street Ad Registra		
Divisio	Registration Section Division of Corporations		Registration Section Division of Corporations		ons
	ox 6327	22214	The Cen	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N.	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303



2021 KON 10 Va 1: #8

## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2021

CHRISTY SATTERFIELD 5936 ASHTON WOOD CIRCLE MILTON, FL 32570

SUBJECT: ALL ABOUT CONCRETE LLC

Ref. Number: L19000266926

We have received your document for ALL ABOUT CONCRETE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

You failed to sign the form and please verify whether or not you intend to change the corporate name and verify the spelling.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

Letter Number: 721A00024614

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

AII	TICLES OF	CROANIZ	DATION	•
		OF		
				10,
All About Concrete, LLC				· /2 · ·
(Name of the Lir	nited Liability Co (A Florida Limi	mpany as it now ap ited Liability Compa	opears on our records.)  any)	and assigned?
he Articles of Organization for this Limited	Liability Comp	any were filed or	n <u>09/24/21</u>	and assigned 🛴
orida document number L19000266926	<del></del> .			, -
his amendment is submitted to amend the fo	llowing:			
. If amending name, enter the new name	of the limited l	liability compan	y here:	
all About Concrere, LLC				
ne new name must be distinguishable and contain the	words "Limited L	iability Company,"	the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if appl	icable:	5936 Ashto	n Wood Cir Milton, FL 325	570
rincipal office address MUST BE A STRE	ET ADDRESS	2		
			<u> </u>	
				<del></del>
nter new mailing address, if applicable:				
failing address MAY BE A POST OFFICE	F ROY			
tuning unaress mar be a rost of rice	<u>: BOX)</u>			
			<del></del>	
If amending the registered agent and/or	registered offic	ce address on or	ir records, <u>enter the nan</u>	ne of the new register
ent and/or the new registered office addr	ess nere:			
Name of New Registered Agent:	Christy Satte	erfield —————		
New Registered Office Address:	5936 Ashton	Circle	_	
	<del></del>	Enter	Florida street address	
	Milton	FL	, Florida 32	:570
		City		Zin 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>	Type of Action
AMBR	Christopher Taylor	5584 Hill Street	<b>=</b> Add
		Milton,FL 32570	
			□Change
AMBR	AMBR Patrick Rich	5030 Permisson Hollow Rd	<b>≡</b> Add
		Milton, FL 32583	□Remove
			□Change
			□ Remove
			□ Change
			□ Add
			□ Remove
			□Change
		<del></del>	□Add
		ПRеточе	
		<del></del>	Change
<del></del>			□Add
		□Remove	
			□Change

D, II ati	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
,	
-	
-	
-	
-	
_	
(If an eff Note:	ive date, if other than the date of filing:
the record ford is fil	d 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 ed.
Dated	Christy Sathafill
	Signature of a member or authorized representative of a member
	Christy Satterfield  Typed or printed name of signee

Filing Fee: \$25.00