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JUL 01 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations					
end nez	r with	E MUCH MORE LLC			
SUBJEC	ω1:	Name of Lim	ited Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
ANDRES S. MARTIN					
			Name of Person		
		PAVERS & MUCH MOR	ELLC		
			Firm/Company		
5253 S MILITARY TRAI			1.		
LAKE WORTH, FL 33463 DWILL10657@AOL.COM			Address		
			3		
			City/State and Zip Code	 	
			1		
		E-mail address: (to be used for future annual report no	tification)	
For furth	ier information c	oncerning this matter, please co	all:		
ANDRI	S MARTIN		561 502-3419		
Name of Person		at ()	me Telephone Number		
Enclosed	l is a check for th	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 Addres Registration 5	Section	Street Address: Registration So		
	Division of C P.O. Box 632	•	Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3

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 "LLC." 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.	PAVERS & MUCH MORE LLC		پسر، فتط با، سن
Florida document number 1.20000099429 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 "LLC." 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:	(<u>Name of the Limited Liability Con</u> (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	
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:		any were filed on <u>04/08/2020</u>	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.C." 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:	This amendment is submitted to amend the following:		0
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:	A. If amending name, enter the new name of the limited li	iability company here:	
(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:	The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation "LLC" or the abl	breviation "L.L.C."
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:	Enter new principal offices 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:	(Principal office address MUST BE A STREET ADDRESS)		
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:	Enter new mailing address, if applicable:		
agent and/or the new registered office address here:	(Mailing address MAY BE A POST OFFICE BOX)		
Name of New Registered Agent:		ce address on our records, enter the name	e of the new registered
	Name of New Registered Agent:		
New Registered Office Address: Enter Florida street address	New Registered Office Address:	Enter Florida street address	
. Florida		, Florida	
City Zip Code			Zip Code

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>	Name	Address	Type of Action
MGR	MARILIA O. VELASQUEZ	15 N BUFFALO STREET	Add
		LAKE WORTH, FL 33461	□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
		 	□Remove
			□Add
			Remove
			□Change
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			□Remove
			☐ Change

						
						
						
						
						
Affective date, if other that fan effective date is listed, the date inserted in document's effective date on	his block does	not meet the ap	plicable statuto	ng or more than 90 ry filing requiren	(optional) days after filing.) P eents, this date wi	ursuant to 605,0207 (If not be listed as t
record specifies a delayed ed d is filed.	fective date, bu	ut not an effectiv	ve time, at 12:0	l a.m. on the earl	ier of: (b) The S	Oth day after the
Dated		. 2020				
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Filing Fee: \$25.00