ADURINE Departinent of State 43

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To:		
	Division of Corporations	
	Fax Number : (850)617-6383	
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	Account Name : EXPERTAX	
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	Phone : (407)777-7470	
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DANY DRYWALL LLC

Certificate of Status	11
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TO: Registration Section Division of Corporations

DANY DRYWALL LLC

SUBJECT:

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:

	Pedro A. Vasquez		
	· · · · · · · · · · · · · · · · ·	Name of Person	
		Firm/Company	
	209 Larch Rd	·	
		Address	
	Ocala, Fl 34480		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report not	fication)
For further information of	concerning this matter, please c	all:	
Pedro A. Vasquez		407 715 8828	
Name o	of Person	Area Code Daytin	e Telephone Number
Enclosed is a check for t	he following amount:		
Enclosed is a check for t	he following amount: \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (edditional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	\$30.00 Filing Fee & Certificate of Status \$31 Section	Certified Copy	Certificate of Status & Certified Copy (additional copy is enclosed)

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ТО
ARTICLES OF ORGANIZATION
OF

		220 JU -	<u>8 - Pil 2: 2</u> 7
DANY DRYWALL LLC			<u> </u>
(Name of the Limited Liabili (A Florid	ity Company as it now appe a Limited Liability Company	r <u>ars on our records.</u>))	
The Articles of Organization for this Limited Liability C Florida document number	Company were filed on _	06/0-02020	and assigned
Plonda document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company	<u>bere</u> :	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," th	e designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	<u> </u>	
(Principal office address MUST BE A STREET ADD)	RESS)		
Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u>			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on ou	r records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter /	Florida street address	
		, Florid	
	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

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If amending Authorized Person(s) summized to trange, chief the fire, hard and address of each person and a

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u> 732J JL ² - 9 Pil 2: 27	<u>Type of Action</u>
MGR	Vasquez, Juan C	209 Larch Rd	🗆 Add
		Ocala, Fl 34480	
			□Change
			🗆 Add
		·	DRemove
			□Change
	· · · · · · · · · · · · · · · · · · ·		□Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets. if necessary.)

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<u> </u>	<u> </u>	
Effective date,	if other than the date (of filing:(optional) refic and cannot be prior to date of filing or more than 90 days after tiling.) Pursuant to 605.0207 (3
Note: If the dat	is listed, the date must be spe- e inserted in this block dou ctive date on the Departme	es not meet the applicable statutory filing requirements, this date with hot be tisted as the
he record specifie ord is filed.	s a delayed effective date,	but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	July 08	2020
		DV
	Signati	ute of a member or authorized representative of a member
		PEDRO A VASQUEZ

Filing Fee: \$25.00

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