## L20000316165

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## **COVER LETTER**

Division of Co	orporations		
Stellar Clu	ean and Seal, LLC		
		nited Liability Company	<del></del>
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	David Dutra		
		Name of Person	<del></del>
		Firm/Company	<del></del>
	4405 Citrus Blvd.		
		Address	1.
	Cocoa, FL 32926		
		City/State and Zip Code	
	Stellar.Paver.Sealing@gma		
		to be used for future annual report notifi	ication)
For further information of	concerning this matter, please c	all:	
David Dutra		321 750-3357	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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)

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahagasa EL 20214

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stellar Clean and Seal, LLC.		
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our rec .imited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 10/06/2020	and assigned
Florida document number 1.20000316165	<b></b>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Stellar Paver Scaling, LLC.		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "I	.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	ESS)	<u> </u>
		23 J
		A 1
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		SEP PR
	<del></del>	
		<u> </u>
3. If amending the registered agent and/or registered ogent and/or the new registered office address here:	office address on our records, <u>ent</u>	ter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	lvess
		Florida
	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 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

Title	Name	Address	Type of Action
Member	David Dutra	4405 Citrus Blvd.	□Add
`		Cocoa, Fl. 32926	□Remove
			<b>■</b> Change
			🗆 Add
		<u></u>	□Remove
	***		🗆 Add
			□Remove
			□Change
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	<del></del>		□Add
			□Remove
			□Chanue

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