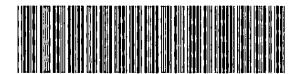
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(Requestor's Name)				
(Address)				
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(144,400)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(During Faibulle of				
(Business Entity Name)				
(Document Number)				
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DEC 0 7 2020 S. YOUNG



COVER LETTER

EMPIRE ST	ONE & GRANITE LLC				
SUBJECT:	Name of Li	mited Liability Company			
The enclosed Articles of A	mendment and fee(s) are so	ibmitted for tiling.			
Please return all correspon	dence concerning this matte	er to the following:			
		Ernesto R Llerandi			
	Name of Person				
		Empire Stone & Granite LLC			
		Firm/Company			
		7820 w 2nd Ct			
	· · · · · · · · · · · · · · · · · · ·	Address			
		Hialeah Fl 33014			
	- • •	City/State and Zip Code			
		ellerandi@yahoo.com			
Park de la constant		(to be used for future annual report notifi	cation)		
	ncerning this matter, please	call:			
Ernesto R Llerandi		954 559-1304 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:		Street Address:			

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Empire Stone & Granite LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 10/09/2020 The Articles of Organization for this Limited Liability Company were filed on 1.20000320994 Florida document number 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 "L.L.C." 7820 w 2nd Ct Enter new principal offices address, if applicable: Hialeah FL 33014 (Principal office address MUST BE A STREET ADDRESS) 6216 NW 170 Ter Enter new mailing address, if applicable: Hialeah FL 33015 (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 _. Florida _

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.

City

. 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>	Address	Type of Action
AMBR	Jose Ramon Quintana Deulofeu	20039 NW 62ND AVE	
		HIALEAH FL 33015	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			DAdd
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change

o. II ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	re date, if other than the date of filing: (optional) ctive 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 %) if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the m's effective date on the Department of State's records.
f the record record is file	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 d.
Dated _	OCTOBER 27 2020 .
) and the
	Signature of a member or authorized representative of a member
	ERNESTO R LLERANDI

Filing Fee: \$25.00

Typed or printed name of signee