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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Jonathon Morris tile and Stone LLC 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:
Jonathon Morris
Jonathon Morris file and stone LL
220 West Virginia Avenue
Jonathon Morristile and Stone agmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jonathon Morris at (352), 410-4661 Name of Person at (352) Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Securified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

FILED

	OF	2022
Jonathon Mo.	d Liability Company as it now apper	Stone LL STATE
The Articles of Organization for this Limited Lia Florida document number 120000382		12-7-2020 and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET	ble:	e designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or reagent and/or the new registered office address		records, enter the name of the new registered
Name of New Registered Agent:	Krystal Be	elhumeur
New Registered Office Address:	220 Wast V	Torista Street address
		, Florida 32763
New Registered Agent's Signature, if changing Ro	egistered 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.

tranging 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>	Address	Type of Action
Amb-	Krystal D. Belhumcur	220 W. Virging Ave	🖸 Add
		220 W. Virgina Ave Olange city, Fl 32763	Removo
			□Change
			□Add
			□Remove
		.	[] Change
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			🗆 Remove
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			□Remove
			Change

Ifam	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff	ive date, if other than the date of filing: (optional) ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as lent's effective date on the Department of State's records.
he recor	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 led.
Dated	6-20-2022 11:00 am
	ann
	Signature of a member or authorized representative of a member
	Jonathon Clark Morris Typed or printed name of signee

Filing Fee: \$25.00