

1210000052776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

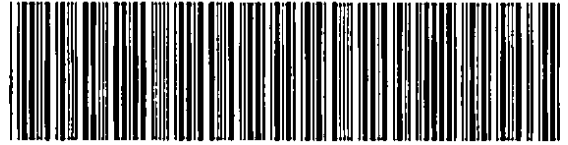
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2021 NOV 17 AM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

FILED

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MONTANOS GABINETS & GRANITE 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:

ADRIAN MARCOS MONTANO

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

4511 W HENRY AVE

\_\_\_\_\_  
Address

TAMPA, FL 33614

\_\_\_\_\_  
City/State and Zip Code

AMARCOSMONTANO@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADRIAN MARCOS MONTANO

813

296 - 3186

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:**

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  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2021 NOV 17 AM 12:40

MONTANOS CABINETS & GRANITE LLC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/29/2021 and assigned  
Florida document number L21000052776.

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."

Enter new principal offices address, if applicable:

4511 W HENRY AVE

(Principal office address MUST BE A STREET ADDRESS)

TAMPA, FL 33614

Enter new mailing address, if applicable:

4511 W HENRY AVE

(Mailing address MAY BE A POST OFFICE BOX)

TAMPA, FL 33614

**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:

ADRIAN MARCOS MONTANO

New Registered Office Address:

4511 W HENRY AVE

*Enter Florida street address*

TAMPA

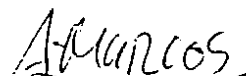
*City*

Florida 33614

*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

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>	<u>Address</u>	<u>Type of Action</u>
P	ADRIAN MARCOS MONTANO	4511 W HENRY AVE	<input type="checkbox"/> Add
		TAMPA, FL 33614	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	YILAN DEL CRISTO SANCHEZ	4511 W HENRY AVE	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33614	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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This image shows a single page from a notebook or ledger. It features ten evenly spaced, horizontal black lines across its entire width, providing a guide for writing. The paper itself is plain white, and there are no margins, titles, or other markings present.

(If an effective 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)(b)

If the record 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 record is filed.

APL 42601  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**