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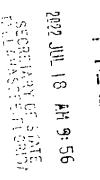
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## **COVER LETTER**

Registration Section

Division of C	orporations		
	MARTINEZ STUCCO & DRYV	VALL LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Picase return all corres	pondence concerning this matter	to the following:	
	MARIA E. MARTINEZ		
		Name of Person	
	CRUZ MARTINEZ STUC	CCO & DRYWALL LLC	2025 2025 2037
	<del></del>	Firm/Company	
	10010 DELAWARE ST		8 -8
		Address	20
	BONITA SPRINGS, FL 3	4135	9: 56 (0)
	flakiss.em@gmail.com E-mail address: (	City/State and Zip Code to be used for future annual report not	<del></del>
For further information	n concerning this matter, please c		
MARIA E. MARTINI	ΣZ	239 560-8499 at ( )	
Name	e of Person		ue Telephone Number
Enclosed is a check for	r the following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addi Registration	n Section	Street Address: Registration Se	
Division of Corporations P.O. Box 6327		Division of Co The Centre of	
	e, FL 32314		be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRUZ MARTINEZ STUCCO & I			
(Name of the Limi	ed Liability Company as it no (A Florida Limited Liability Co	w appears on our records. ompany)	)
The Articles of Organization for this Limited L	iability Company were file	ed on03/03/2021	and assigned
This amendment is submitted to amend the fol	owing:		
A. If amending name, enter the new name o	f the limited liability com	pany here:	
		<u>-</u> ,	
he new name must be distinguishable and contain the	vords "Limited Liability Compa	ny," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	able:		
Principal office address MUST BE A STREE	ET ADDRESS)		2022
Enter new mailing address, if applicable:			80 I
(Mailing address MAY BE A POST OFFICE BOX)			
			37 38
B. If amending the registered agent and/or	ranistared affice address (	on our records, enter t	• •
agent and/or the new registered agent and/or		m var records, <u>cher c</u>	The state of the s
Name of New Registered Agent:	MARIA E. MARTINEZ		
New Registered Office Address:	10010 DELAWARE ST.		
New Registered Office Faddress.		Enter Florida street address	

## 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.

Cin

BONITA SPRINGS

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
P	LEONARDO CRUZ GONZALEZ	10010 DELAWARE ST	□Add
		BONITA SPRINGS, FL 34135	Remove
			☐ Change
Ь	MARIA E. MARTINEZ	10010 DELAWARE ST	
		BONITA SPRINGS, FL 34135	□Remove
			Change  Change
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ffective date, if other than the an effective date is listed, the date material of the date inserted in this becoment's effective date on the I	ist be specific and block does not ir	cannot be prior neet the applic	r to date of filin cable statutory	g or more than 9 v filing require	<b> (option:</b> Odays after fili ments, this da	ng.) Pursuan	t to 605.0 be listed
	ve date, but not	an effective t	ime, at 12:01	a.m. on the ea	rlier of: (b)	The 90th d	ay after t
record specifies a delayed effecti I is filed.							
is filed.	,	2022					
l is filed.	Signature of 6.7	uffa	·				