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(Requestor's Name)				
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificate	s of Status		
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Special Instructions to	Filing Officer:			
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Office Use Only



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COVER LETTER

TO:

TO: Registration Section Division of Corporations					
SUBJECT: MAYANEZ POO	I and THE LLC				
SUBJECT: MAYQUEZ POOL AND TILE, LLC Name of Limited Liability Company					
The enclosed Articles of Amendment and fee(s) are su	bmitted for filing.				
Please return all correspondence concerning this matte	er to the following:				
Yoshiel	Narquez-Hernandez Name of Person				
Marquez	POOL and TILE, LLC Firm/Company				
110944	SW 119 Pl Address				
<u>Miami,</u>	F 1 33177 City/State and Zip Code				
YOSNIEI M E-mail address:	(to be used for future annual report notification)				
For further information concerning this matter, please	call:				
YOSHIEL MAYAUEZ-HEYN Name of Person	Area Code Daytime Telephone Number				
Enclosed is a check for the following amount:					
S \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, 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

. МА	RQUEZ POOL ANI	O TILE LLC	2021 OCT	12 AM 9:	32
(Name of the Limit	(A Florida Limited Li	y as it now appe ability Company	ars on our record	HRY OF ST	ATE
The Articles of Organization for this Limited Li	iability Company v	vere filed on _	09/29/2	: <u>150.</u>	and assigned
Florida document number <u>L210002</u>	>2240				
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name of	f the limited liabil	ity company	<u>here</u> :		
The new name must be distinguishable and contain the w	ords "Limited Liabilit	y Company," the	designation "LLC	" or the abbrevia	tion "L.IC."
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	T ADDRESS)				
			<u> </u>		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	ROY)	-			
maing dates with BE AT OST OFFICE	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
B. If amending the registered agent and/or r agent and/or the new registered office addres		idress on our	records, <u>enter</u>	the name of t	he new registered
Name of New Registered Agent:			<u>, </u>		
New Registered Office Address:					
		Enter Florida street address			
		Florida			
Non-Donish and A. (2007)		City		Zij	o Code
New Registered Agent's Signature, if changing he lange of the appointment as registere provisions of all statutes relative to the propaction as regional the obligations of my position as regional being filed to merely reflect a change in the accompany has been notified in writing of this	d agent and agre- er and complete p stered agent as pr registered office o	performance or provided for in	of my duties, ar Chapter 605, .	id I am famil. F.S. Or, if thi	iar with and s document is

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>	Address	Type of Action
AMBR	Yosniel Marquez-Heinar	tez 16944 SW 1197 Pl Miami, F1 331	<u>^^</u> [X]Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ___ Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Dated <u>September</u> 29 2021. Signature of a member or authorized representative of a member YOSNIEL MARQUEZ-Hernandez Typed or printed name of signee

EU: E casoo