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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: ESPINDOL	A DRYWALL LLC		
30bscc1.	Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter (to the following:	
	ISRAEL HERNANDEZ E		
		Name of Person	
		Firm/Company	
			· 13
	103 N MULBERRY ST	Address	
			ر دی
	FELLSMERE FL 32948	City/State and Zip Code	
	ESPINDOLA0019@gmail.c	·	J. 22
	E-mail address: (t	o be used for future annual report notification)	<u> </u>
For further information co	oncerning this matter, please ca	dl:	, —
ISRAEL HERNANDEZ	ESPINDOLA	at (772) 453-4642 Area Code Daytime Telephone N	<u>_</u> _
Name of	Person	Area Code Daytime Telephone N	umber
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy fitional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 632' Tallahassee. F	ection brightness 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Su Tallahassee, FL 32303	nite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 If amending the registered agent and/or register agent and/or the new registered office address here 	;	
2	:	
If amonding the registered egent and/or register	cu office address on our records, circi	the name of the new regist
	red office address on our records enter	ے
		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		<u> </u>
<u>Principal office address MUST BE A STREET ADL</u>	<u> </u>	-
Enter new principal offices address, if applicable:		
Ç	imited Liability Company. The designation "LLC	or the appreviation "L.L.C.
he new name must be distinguishable and contain the words "L	9.1.1.1.1.2. A	and the state of t
A. If amending name, enter the new name of the lin	mited liability company here:	
This amendment is submitted to amend the following:		
Torida document number L21000258485	·	
The Articles of Organization for this Limited Liability	Company were filed on 06/01/2021	and assigned
(A11011	ility Company as it now appears on our records ida Limited Liability Company)	

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 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	MARILU RAMOS	103 N MULBERRY ST	■Add
		FELLSMERE FL 32948	
			☐ Change
			□Add
			□Remove
			E Change
			☐Remove
			□Change
			□Add
			Remove
			□ Change
	<u>.</u>		□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change

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: 05/01/2023(optional) (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) 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 MAY I Signature of a member or authorized representative of a member Marily Raynes POA Marily ramos, poa for Israel Hernandez Espindola

Typed or printed name of signee