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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JTAX CORP Account Number: I2020000009 Phone : (954)544-1000

Fax Number : (954)678-4500

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address: HELLO@JTAXCORP.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VOLCANO STONE AND PLYWOOD LLC

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AUG 3 1 2022

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Help

ARTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION OF

VOLCANO STONE AND PLYWOOD LLC		
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our recontability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000273422</u> .	were filed on 06/11/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "I.I.	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		2022 SEC. 2022
Mailing address MAY BE A POST OFFICE BOX)		
		3
B. If amending the registered agent and/or registered office a		SE SE
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>ente</u>	r the name of the new registe
		. 34 ATE
Name of New Registered Agent:		125
New Registered Office Address:		<u> </u>
	Enter Florida street addr	ths.
		Florida
	City	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.

From: Jtax Corp*

Fax: 19546784500

To:

Fax: (850) 617-6383

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08/30/2022 3:19 PM

if amending Authorized rerson(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
MGR	REBECA DA SILVA MELLO	RUA CASUARINAS 39 CHARITAS	🗆 Add
		NITEROI, RIO DE JANEIRO, 24370-130, BRA	Remove
			Change
AMBR	GUSTAVO CAMPOS TABOADA	RUA MARCOS OTAVIO VALADAO 74 CAMBO	NF □Add
		NITEROI, RIO DE JANEIRO, 24358-609, BRA	■ Remove
			Change
AMBR	SOUZA	RUA PROF. CARLOS NELSON F. DOS SANTOS	S. 35 3 □∧dd
		NITEROI, RIO DE JANEIRO, 24358-609	Remove
			Change
			🗆 Add
			Remove
			□Change
		 	□Add
			□Remove
			Change
			□Add
			□Remove
			Change

Fax: 19546784500

To:

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-	
Note:	ive date, if other than the date of filing:
he reco ord is fi	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	AUGUST 30th . 2022
	Francis hatter lay
	Signature of a member or authorized representative of a member