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☐ PICK-UP	□ WAIT	MAIL
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

FO: Registration Se Division of Cor					
	e Industrial CO LLC	;			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JATZEL CASTIŁLO				
		Name of Person			
	RUBBERCERAMIC IND	USTRIAL LLC	CO.	20	
		Firm/Company	-11	)21 S	٠.
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	· · · · · · · · · · · · · · · · · · ·	Address		5	1
	SUNRISE FLORIDA 333	51	SEST.	2021 SEP 16 PM 4: 1	,
		City/State and Zip Code		0	
	rubberceramic@gmail.com	to be used for future annual report n	atitionian		
For further information c	oncerning this matter, please c	·	onneation		
JATZEL CASTILLO		÷1 78669066	76		
Name o	f Person	Area Code Dayt	ime Telephone Number	_	
Enclosed is a check for t	he 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 F Certificate of \$ Certified Copy (additional copy is	Status &	
Mailing Address		Street Address:			
Registration ! Division of C		Registration S Division of C			
P.O. Box 632	27	The Centre of	f Tallahassee		
Tallahassee,	FL 32314	2415 N. Mon	roe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RUBBERAMIC INDUSTRIAL CO LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jiability Company)	
The Articles of Organization for this Limited Liability Company	were filed on JUNE 17 2021	and assigned
Torida document number L21000283090		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
RUBBERCERAMIC INDUSTRIAL LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		1021 SE 77
inter new mailing address, if applicable:		0 P J
Mailing address MAY BE A POST OFFICE BOX)		S F
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	la.
<del></del>	, FIORIC	I <b>a</b> 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>	Address	Type of Action
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			□Remove
			□Change
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ective date, if other than the date of effective date is listed, the date must be speci	ific and cannot be pri	ior to date of filing	g or more than 90 da	(optional) ys after filing.)	Pursuant	to 605.020
te: If the date inserted in this block does ument's effective date on the Department	s not meet the app	licable statutory	tiling requiremen	nts, this date v	vill not	be listed as
ament's effective date on the isepartite	ne or state 3 record	us.				
cord specifies a delayed effective date, h s filed.	out not an effective	e time, at 12:01	a.m. on the earlie	r of: (b) The	: 90th da	ıy after the
SEPTEMBER 15	2021					
T 1	11					
	/ /1/////		tative of a member			

Typed or printed name of signee