# 121000317557

(Requestor's Name)
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PICK-UP WAIT MAIL
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2021 SEP -1 PM 3: 15

SECRETARY OF STATE



### COVER LETTER

		COVERCETTER		
TO: Registration Sec Division of Corp				
SUBJECT: TOONE	y's Stucco Name of Lim	4 PLASTEY REPAI	e,llc	
The enclosed Articles of A	amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Devek Too	Name of Person  Cot Placter Rep		
	Tooney Stuc	Cot Placter Rep	AIR, LLC	
	2307 Green	Briev 5+ Address	CRETAGE	-T1
	Deltona Fl	32738 City/State and Zip Code  Complete Com to be used for future annual report notific	Y OF ST	
	aploski 26 E-mail address:	to be used for future annual report notifie	ation)	<u>,</u>
For further information co	ncerning this matter, please ca			
Devek Too Name of	Person P	at (386) 444.13 Area Code Daytime T	14 Felephone Number	
Enclosed is a check for the	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 Fee. Certificate of Status & 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Towney's Stucco + Place (Name of the Limited Liability Comp.) (A Florida Limited)	Steving Repair, UC. unvasit now appears on bur records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>421000317557</u> .	were filed on $7 - 4 - 2$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Tooney'S Stueco + Plasterias The new name must be distinguishable and contain the words "Limited Liabi	TREATER LLE  Tity Company," the designation "LLC" or the abbreviating "L.L.C."
Enter new principal offices address, if applicable:	2307 GRENBRUN SE ST
(Principal office address MUST BE A STREET ADDRESS)	DeltoNA FL 32738
	PH SEE S
Enter new mailing address, if applicable:	CSU/ Green Bylev St
(Mailing address MAY BE A POST OFFICE BOX)	DeLtoNA FL 32735# "
B. If amending the registered agent and/or registered office : agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida sireet address
	, Florida
	City Zin 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 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
MGR	Oerek Tooney	2307 Green Brier St Deltona FL 32738	🗆 Add
		Deltona FL 32738	□Remove
			<b>≇</b> Change
			⊡Add
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ed <u>8-28-71</u>			
Signature of a member or authorized representative of a member			

Filing Fee: \$25.00