L22000013493

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
•	. ,	
	(0) + 17' (0)	. 16
(Cit	y/State/Zip/Phon	е <i>#</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(,	,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Eiline Officer	1
Special Instructions to	Filing Officer:	

Office Use Only



400387928484

05/20/22--01016--003 **25.00

UNISION OF CORPORATIONS

22 MAY 20 AH 8: 01

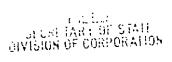
T. MATTHEWS JUL 2 1 2022

COVER LETTER

SUBJECT: F&F Drywall LLC
Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 336 E College Ave, Ste 301 Address Tallahassee, FL 32301
Please return all correspondence concerning this matter to the following: Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 336 E College Ave, Ste 301 Address Tallahassee, FL 32301
Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 336 E College Ave, Ste 301 Address Tallahassee, FL 32301
Name of Person ZenBusiness Inc. Firm/Company 336 E College Ave, Ste 301 Address Tallahassee, FL 32301
ZenBusiness Inc. Firm/Company 336 E College Ave, Ste 301 Address Tallahassee, FL 32301
Firm/Company 336 E College Ave, Ste 301 Address Tallahassee, FL 32301
336 E College Ave, Ste 301 Address Tallahassee, FL 32301
Address Tallahassee, FL 32301
Tallahassee, FL 32301
City/State and Zin Code
, the state of the
fulfillment@zenbusiness.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Dempsey c/o ZenBusiness Inc. 844 493-6249
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



22 MAY 20 AM 8: 01

F&F Drywall LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records a Limited Liability Company))
The Articles of Organization for this Limited Liability C	Company were filed on 01/05/2022	and assigned
Florida document number 1.22000013493	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter t</u>	he name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	
	, Flo	rida
New Registered Agent's Signature, if changing Registered	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.

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>	<u>Address</u>	Type of Action
AMBR	Saban Fromal	717 NE 12th ave	
		Ocala, FL 34470	□Remove
			☐ Change
			□Add
			□Remove
		····	□Change
			□Add
			□Change
	·		□Add
		 	□Remove
			□Change
			□Add
		····	□Remove
			□Change
			□Add
			□Remove
			□ Chanaa

					· · · · · · · · · · · · · · · · · · ·	
						
			· ·- ·· ·			
	·					
			 		·	
	_ 			<u>.</u>		
						
				 \ 		
		-				
 					<u> </u>	
			 	·		
		· · · · · · · · · · · · · · · · · · ·				
				 .		
-						
				· · · · · · · · · · · · · · · · · · ·	· ····	
Tective date, if other than an effective date is listed, the date ote: If the date inserted in the ocument's effective date on the	s block does no	ot meet the applic	able statutory f	(or more than 90 days alling requirements,	optional) after filing.) Pursuan this date will not	t to 605.0207 be fisted as
ecord specifies a delayed effe is filed.	ctive date, but n	ot an effective t	ime, at 12:01 a.:	m. on the earlier of	f: (b) The 90th da	iy after the
ited May 12			·			
	l Fromal					
<u>ls/Roger Lemu</u>	el Fromal Signature of	a niember or author	orized representa	ive of a member		

Filing Fee: \$25.00