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## **COVER LETTER**

TO:

Tallahassee, FL 32314

	ED STONE RESTORATION L	LC		
CI:	Name of Limi	ted Liability Company		
losed Articles of	Amendment and fee(s) are subr	nitted for filing.		
ctum ali correspo	indence concerning this matter t	to the following:		
	CARL L KENNEDY			
		Name of Person		
		Firm/Company		
	980 N FEDERAL HWY S	TE 110		
		Address		
	BOCA RATON FL 3343	2		
	CLKTax@AOL.COM	City/State and Zip Code		
	<del>-</del>	o be used for future annual r	eport notifica	ation)
her information c	concerning this matter, please co	all:		
L KENNEDY			-2236	
Name o	of Person	Area Code	Daytime T	elephone Number
ed is a check for t	he following amount:			
5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
				ion
Division of C	Corporations	Division	of Corpo	orations
	her information of L KENNEDY  Name of the distance of the section of Control	Name of Limi  Name of Limi  losed Articles of Amendment and fee(s) are subreturn all correspondence concerning this matter to CARL L KENNEDY  980 N FEDERAL HWY S  BOCA RATON FL 3343  CLKTax@AOL.COM  E-mail address: (to the information concerning this matter, please can be compared to the concerning this matter, please can be concerned to the concerning this matter. The concerning this matter is a check for the following amount:  1.00 Filing Fee	ADVANCED STONE RESTORATION LLC    Name of Limited Liability Company	ADVANCED STONE RESTORATION LLC  Thame of Limited Liability Company  losed Articles of Amendment and fee(s) are submitted for filing.  curn all correspondence concerning this matter to the following:  CARL L KENNEDY  Name of Person  Firm/Company  980 N FEDERAL HWY STE 110  Address  BOCA RATON FL 33432  City/State and Zip Code  CLKTax@AOL.COM  E-mail address: (to be used for future annual report notification for the information concerning this matter, please call:  L KENNEDY  Name of Person  Area Code  Daytime 1  Area Code  Certificate of Status  Mailing Address:  Registration Section  Division of Corporations  Street Address:  Registration Section  Division of Corporations  Division of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADVANCED STONE RESTORATION L		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our ida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number L22000034378		Y 01, 2022 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited 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 ADI	DRESS)	
Enter new mailing address, if applicable:	<del> </del>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		enter the name of the new registere
Name of New Registered Agent:	14415-1444-1	A-1-1-
New Registered Office Address:		
	Enter Florida street	address
		, 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.

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	<b>Type of Action</b>
AMBR	RICHARD DUNN	2612 NE 13th COURT	
		FORT LAUDERDALE FL 33304	■Remove
			□Change
			□Add
			□Remove
		Change	
		□Add	
			□Remove
			□Change
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(If an effi	ve date, if other than the date of filing:  (optional)  (cetive 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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
the record cord is fil	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 ed.
Dated :	7-7-2022 Chur Hage.

Typed or printed name of signee