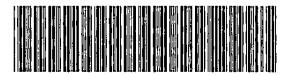
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T. MATTHEWS APR 2 9 2022

COVER LETTER

Registration Section

TO:

Division of Cor	porations		
	AND REMODELING LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JOSE J. MURILLO DIAZ		
		Name of Person	
	J&N TILE AND REMOD	ELING LLC	
		Firm/Company	
	4410 MAINE ST		
		Address	· · · · · · · · · · · · · · · · · · ·
	LAKE WORTH, FL. 3346	51	
		City/State and Zip Code	
	danery06.og@gmail.com		
	E-mail address: (to be used for future annual report not	tification)
For further information ed	oncerning this matter, please c	all:	
JOSE J. MURILLO DIA	Z	561 294-9432 at ()	
Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	S30.00 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 S Division of Co P.O. Box 632'	ection orporations	Street Address: Registration Se Division of Co The Centre of	rporations
Tallahassee, F	L 32314		oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabi</u> (A Florid	ility Company as it now appears on our records. da Limited Liability Company))
The Articles of Organization for this Limited Liability Florida document number L22000078696	Company were filed on <u>02/16/2022</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lit	inited 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 ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>enter tl</u> :	ne name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	ida

New Registered Agent's Signature, if changing Registered Agent:

LON THE AND REMODELING LLC

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
AMBR	NANCY D. ORDONEZ GALEAN	4410 MAINE ST.	■Add
		LAKE WORTH, FL. 33461	□Remove
			Change
			
			EJRemove
			©Change
			□ Add
			□Remove
			□Change
	· 		□Add
			□Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

		 		
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fective date, if other than the done effective date is listed, the date must bete: If the date inserted in this block cument's effective date on the Dep	k does not meet the appl	icable statutory filing	(optional re than 90 days after filing requirements, this days	if) ng.) Pursuant to 605.020 ite will not be listed a
ecord specifies a delayed effective is filed.	date, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b)	The 90th day after the
ed APRIL 06	2022	·		
(2)				
V	gnature of a member or aut			