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Office Use Only



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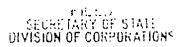
T. MATTHEWS JUN 29 2022

COVER LETTER

TO: Registration Section

Division of Co	rporations		
JRG Grani	te 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:	
	Kendy Torres Garcia		
		Name of Person	
	JRG Granite LLC		
	-	Firm/Company	
	248 Four Mile Road		
		Address	
	Freeport FL 32439		
	•	City/State and Zip Code	
	rf05202014@gmail.com		~~
		to be used for future annual report noti	rication)
For further information of	concerning this matter, please c	all:	
KendyTorres Garcia		850 736-5322 at ()	
Name o	of Person		e 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



JRG Granite LLC

22 MAY -6 AM 9: 42

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Li	lability Company	were filed on $\frac{04/04/20}{}$)22	and assigned
Florida document number L22000159831	·			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited l <u>iab</u>	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designa	ation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
		<u></u>	 	.
B. If amending the registered agent and/or r	egistered office :	address on our record	ds, enter the name	of the new register
agent and/or the new registered office addres	_		,	
Name of New Registered Agent:	Rafael Garcia			
New Registered Office Address:	248 Four Mile			
		Enter Florida st	reet address	
	Freeport		, Florida <u>3241</u>	<u> </u>
		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 t 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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kendy Torres Garcia	248 Four MIle Rd Freeport FL 32439	= Add
			□Remove
			□Change
MGR	Rafael Garcia	248 Four Mile Rd Freeport FL 32439	🗆 Add
			■ Remove
			□Change
			□Add
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E. Effective date, if other that (If an effective date is listed, the dangle in the document's effective date on	te must be specific his block does r	c and cannot be pric not meet the appli	cable statutory fi	(option of the contract of the	filing.) Pursuant to 605.0207
f the record specifies a delayed ef ecord is filed.	fective date, but	not an effective	time, at 12:01 a.r	n. on the earlier of: (b	The 90th day after the
Dated		2022			
Dated			·		
			horized representat		

Typed or printed name of signee