## h22000338362

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J DENNIS
JAN 1 7 2023

Office Use Only



400396346434

10/21/22--01014--004 \*\*25.00

2022 OCT 21 PM 3: 42

FILED STATE
SEURE FARY OF STATE
PROPROBLETIONS

## **COVER LETTER**

TO:

TO: Registration : Division of Co			
A	URE WALLS & CEILINGS LL	С	
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	oondence concerning this matter	to the following:	
	Benjamin Martinez		
		Name of Person	
	STRUKTURE WALLS &	CEILINGS LLC	
		Firm/Company	
	5310 RIVER ROCK RD		
		Address	<del></del>
	LAKELAND FLORIDA	33809	
	han Gara dan aran Massiliana	City/State and Zip Code	<del></del>
	ben@strukturewallsceilings E-mail address: (	to be used for future annual report notifica	ition)
For further information	concerning this matter, please c	all:	
Benjamin Martinez		863 797-3785 at ( )	
Name	of Person	Area Code Daytime T	elephone 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 Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Section Division of Corporate Centre of Tall 2415 N. Monroe Strallahassee, FL 33	rations lahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STRUKTURE WALLS & CEILINGS LI		
( <u>Name of the Limited Lia</u> (A Flo	ibility Company as it now appears on our records.) orda Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liabilit	y Company were filed on 08/01/2022	and assigned
lorida document number L22000338362	·	
This amendment is submitted to amend the following	<u>:</u>	
a. If amending name, enter the new name of the	limited liability company here:	
he new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX		
3. If amending the registered agent and/or registon gent and/or the new registered office address her		e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Emer Fiornai sirvei duaress	
	, Flor	ida Zıp 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	Benjamin Martinez	5310 RIVER ROCK RD, LAKELAND, FL 33809	<b>=</b> Add
			□Remove
			□Change
,AMBR	Benjamin Martinez	5310 RIVER ROCK RD, LAKELAND, FL 33809	\exists Add
			□Remove
			□Change
AMBR	Mirsa Victoria Velasquez	34 UNCLE PETE RD, HAINES CITY, FL 33844	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		<del></del>	🗆 Add
		<del></del>	□Remove
			□Change

		···					<del></del>
_			<del></del>				
						<u> </u>	
_	<u> </u>		<u> </u>				
_			<u></u>	<del></del> _	<del></del>	<del></del>	
_	<del></del> -						<del></del>
			<del></del>			<u></u> .	
						<u> </u>	
_						<u>.</u>	
	······································	<del> </del>					<del></del>
_				<del></del>	<del></del>	<u> </u>	
_			·				
_							
<del></del>						<del></del>	<del></del>
_	<del></del> -				- · · -		<u></u>
_							<del></del>
an effe lote:	ve date, if other the ective date is listed, the c If the date inserted in ent's effective date or	date must be specifi this block does t	c and cannot be pr not meet the app	ior to date of filing licable statutory	g or more than 90 d filing requireme	_ (optional) ays after filing.) Purents, this date will	suant to 605.020 not be listed a
record	d specifies a delayed o ed.	effective date, bu	t not an effective	e time, at 12:01	a.m. on the earli	er of: (b) The 90	th day after the
	September 1		2022				
ated _				·			
ated _		3	14 3	<u> </u>	itative of a membe		