# L22000442700

(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.	
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M. Lovelt 10/24/23

## Cusion Pavers By Design LLC

Wilfredo Rodriguez 221 SW22nd CT. CAPE CORAL FL 33991 (239) 722-8680

Thank 1/00

### **COVER LETTER**

SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	mitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Wilfredo Rodriguez		
		Name of Person	
	Custom Pavers By Design 1	LI.C	
		Firm/Company	<u> </u>
	221 SW 22nd CT		
		Address	
	Cape Coral FL	33991	
		City/State and Zip Code	····
	CustomPaversbydesign@gm	nail.com o be used for future annual report noti	Gastian
	·	·	nearion)
For further information c	oncerning this matter, please ca	iit:	
Wilfredo Rodriguez		239 722-8680 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	<b>\$30.00</b> 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)

TO:

**Registration Section** Division of Corporations

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Custom Pavers By Design LLC		
(Name of the Limited Liabil) (A Florid	ity 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 10/13/2022	and assigned
Florida document number L22000442700	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	<del></del>	
		J
<ol><li>If amending the registered agent and/or registere gent and/or the new registered office address here:</li></ol>	d office address on our records, <u>enter the n</u>	ame of the new register
<u>Contractor</u>		
Name of New Registered Agent:		<u>•</u>
		:
New Registered Office Address:	Enter Florida street address	<u> </u>
	, 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 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>	Address	Type of Action
AMBR	Brad Gamble	409AIR PORT WAY SANIBEL, FL 33957	□Add
			<b>≡</b> Remove
			□ Change
<del></del>			□Add
			Remove
			Change
	****		□Add
		□Remove	
			☐ Change ?
			DAdd -
		□Remove -	
			Change
		🗆 Add	
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			□Remove
			□Change

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<u> </u>	
Tective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of filing ofe: If the date inserted in this block does not meet the applicable statutory ocument's effective date on the Department of State's records.	g or more than 90 days after filing.) Pursuant to 605.020
record specifies a delayed effective date, but not an effective time, at 12:01 is filed.	a.m. on the earlier of: (b) The 90th day after the
nted 10/2/2023 . 1:12pm	
willing	
7 / Cianatum of a mumbus as authorized	
Signature of a member or authorized represen	native of a member

Filing Fee: \$25.00