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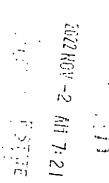
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## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
	SUCCESS 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	ndence concerning this matter	to the following:	
	RUBEN VALENZUELA		
		Name of Person	<del> </del>
	DRYWALL SUCCESS LI	LC	
		Firm/Company	
	1162 LUCKEY ST		
		Address	
	LABELLE, FL 33935		
	<del></del>	City/State and Zip Code	
	BWILLARD@WILLARDO	GROUP.NET	
	E-mail address: (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
RUBEN VALENZUELA	1	863 517-5873	
Name of Person		at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 9		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DYWALL SUCCESS LLC		2022 KO? -2 AH 7:21
(Name of the Limited	d Liability Company as it now appears on our recor A Florida Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Lia Florida document number 122000459468	bility Company were filed on 10/25/2022	3: 15
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
DRYWALL SUCCESS LLC		
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or registered office address		r the name of the new register
Name of New Registered Agent:	RUBEN VALENZUELA	
New Registered Office Address:		
		ess

## 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>	Name	Address	Type of Action
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		<del></del>	□Remove
			□Change
			□Add
			□ Change
			□Add
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	ist be specific and cannot be prior to lock does not meet the applicab		(optional) days after filing.) Pursuant to 605.0207 ( ents, this date will not be listed as t
record specifies a delayed effective	ve date, but not an effective tim	ae, at 12:01 a.m. on the earli	er of: (b) The 90th day after the
d is filed.			
OCTOBER 31	2022	_ ·	
OCTOBER 31	Pulun Valu Signature of a member or author	nzueta	

Filing Fee: \$25.00