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COVER LETTER

TO:

NE LLC		
Name of Lim	ited Liability Company	
f Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
GEORGE VELAZCO		
	Name of Person	
GV STONE LLC		
	Firm/Company	
7240 NW 114TH AVE		
_	Address	
DORAL, FL 33178		
	City/State and Zip Code	
ADLYZC@GMAIL.COM		
E-mail address: (to be used for future annual report noti	fication)
concerning this matter, please ca	all:	
	305 9304758	
of Person		e Telephone Number
the following amount:		
☐ \$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)
	Street Address: Registration Se	ction
Corporations	Division of Cor	porations
27 FL 32314		lallahassee e Street, Suite 810
	f Amendment and fee(s) are subsondence concerning this matter GEORGE VELAZCO GV STONE LLC 7240 NW 114TH AVE DORAL, FL 33178 ADLYZC@GMAIL.COM E-mail address: (concerning this matter, please concerning this matter, please concerning this matter of Status of Person the following amount: S30.00 Filing Fee & Certificate of Status	Address DORAL, FL 33178 City/State and Zip Code ADLYZC@GMAIL.COM E-mail address: (to be used for future annual report notice concerning this matter.) at (

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION TO THE COLUMN OF

2023 AUG 29 AM 8: 08

GV STONE LLC

company has been notified in writing of this change.

(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 Liability Company were filed on $\frac{01/19/2023}{2}$ _____ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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

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
AP	LILIMAX VELASCO	7240 NW 114TH AVE APT 208. DORAL, FL 33178	3 □Add
			_ = Remove
			□Change
MGR	EDDY PINTO QUIROZ	2805 W 14TH AVE APT 27. HIALEAH, FL 33010	■Add
			🗆 Remove
			□Add
			□Remove
			_ Change
			_ □Add
			_ □Remove
			_ □Change
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ffective date, if other than the an effective date is listed, the date in lote: If the date inserted in this ocument's effective date on the	ne date of filing: must be specific and cannot be prior to dat block does not meet the applicable s Department of State's records.		onal) r filing.) Pursuant to 605.0207 s date will not be listed as
record specifies a delayed effect	ive date, but not an effective time, a	t 12:01 a.m. on the earlier of: (b	b) The 90th day after the
l is filed.	2023		
1 is filed.	, 2023		
1 is filed.	my		
1 is filed.	2023 Signature of a member or authorized	representative of a member	

Filing Fee: \$25.00