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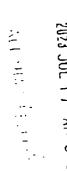
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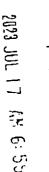
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

K&D STONE SERVICE SOLUTIONS, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: DAVID MENDEZ Name of Person K&D STONE SERVICE SOLUTIONS, LLC Firm/Company 5920 36TH ST W K106 Address BRADENTON, FL 34210 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DAVID MENDEZ 74188065 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is euclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

2023 JUL 17 AM 6:55

K&D STONE SERVICE SOLUTIONS, LLC

	nited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	,,
	(A Frontia Enfared Elability Company)	has Ant stee	
The Articles of Organization for this Limited		/22/2023	and assigned
Florida document number 1.23000144884	·		
This amendment is submitted to amend the fo			
A. If amending name, enter the new name	of the limited liability company h	e <u>re</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the c	esignation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if appl			
Principal office address MUST BE A STRE	EET ADDRESS)		
Enter new mailing address, if applicable:			
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE	<u> </u>		
, -	<u>E BOX)</u>		
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or	registered office address on our r	ecords, <u>enter the</u> name	of the new regi
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or	registered office address on our r	ecords, <u>enter the name</u>	of the new regi
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or gent and/or the new registered office addr	registered office address on our ress here:	ecords, <u>enter the name</u>	of the new regi
Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or gent and/or the new registered office address  Name of New Registered Agent:	registered office address on our ress here:  DAVID MENDEZ  5920 36TH ST W K106	ecords, enter the name	of the new regi
Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or gent and/or the new registered office address  Name of New Registered Agent:	registered office address on our ress here:  DAVID MENDEZ  5920 36TH ST W K106		

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>	<u>Address</u>	Type of Action
MGR	KERLING MARTINEZ	3506 14TH ST W	<b>=</b> Add
		BRADENTON, FL 34205	□Remove
			□Change
		- <u></u>	□Add
			□Remove
			□Change
			□Add
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docu	ment's effectiv	c date on mi	: глерантые	int of Stai	ld's record	ls.	٠			
If the reco	ord specifies a <i>i</i>	lelaved offer	riva data 1							
record is	ord specifies a c filed.	ichtyed effet	.ave date, t	out not an	i effective	time, at 12:	01 a.m. on th	e earlier of: (	b) The 90th	day after the
	JUNE IST	_			2023					
Dated						<del></del> '				
Dated				<b></b> /\						
Dated			Sani	( )	W1.	741				
Dated			Signatur	e of a mer	nber or aut	horized repre	sentative of a	member		

Filing Fee: \$25.00