

L23000145066

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:Division of Corporations
Fax Number : (850)617-6383

From:Account Name : XOTCHILTH VALDIVIA
Account Number : I20220000026
Phone : (305)332-1478
Fax Number : (305)456-4563

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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RECEIVED

SEP 27 AM 9:54

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
369 CONCRETE SERVICE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

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SEP 26 2023

COVER LETTER

TO: Registration Section
Division of Corporations

369 CONCRETE SERVICE 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:

JOSE R. BENITEZ LEZCA

Name of Person
369 CONCRETE SERVICE LLC
Firm/Company
19221 NW 19TH AVE
Address
MIAMI GARDENS, FL 33056
City/State and Zip Code
JOSERIDELBENITEZ@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE R. BENITEZ LEZCA 305 764 - 2159

_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone 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 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

369 CONCRETE SERVICE LLC

(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 03/22/2023 and assigned
Florida document number L23000145066.

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 "L.L.C."

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

_____. 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

MEMBERS FROM OUR ACCOUNT

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ARQUIMIDES PEREZ PACHECO	19221 NW 19TH AVE	☒ Add
		MIAMI GARDENS, FL 33056	☐ Remove
			☐ Change
AMBR	JOSE R. BENITEZ LEZCANO	19221 NW 19TH AVE	☐ Add
		MIAMI GARDENS, FL 33056	☐ Remove
		Please replace LEZCA for == LEZCANO	☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please update the FEIN # 92-3381760
to reflect their number.
Attached IRS Letter

09/27/2023

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

SEPTEMBER 27TH

2023

Dated _____

Signature of a member or authorized representative of a member

JOSE R. BENITEZ LEZCA

Typed or printed name of signer

Filing Fee: \$25.00