1330000215071

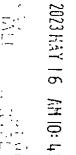
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

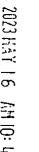
Office Use Only

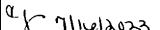


300408683553

05/15/23--01019--029 **60.00







COVER LETTER

SB Concre SUBJECT:	ete LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Jonathan Basford		
		Name of Person	
	SB Concrete LLC		
		Firm/Company	
	6480 SE State Road 26		
		Address	
	Trenton, FL 32693		
	,	City/State and Zip Code	
	jbasford@silverbackconcre		
		to be used for future annual report notific	cation)
For further information of	concerning this matter, please concerning this matter.	all:	
Jonathan Basford		352 350-1185	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 Addres	<u>s:</u>	Street Address:	

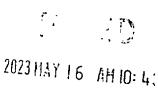
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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**



SB Concrete LLC

(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Cor Florida document number L23000215071	mpany were filed on 5/1/23	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, enter the	name of the new registered
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 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	Sharon Lyn Stankunas	6480 SE State Road 26	
		Trenton, FL 32693	□Remove
			□Change
MGR Frank Stankunas JR	Frank Stankunas JR	6480 SE State Road 26	□Add
		Trenton, FL 32693	Remove
			☐ Change
MGR	Tyler Stankunas	6480 SE State Road 26	□Add
		Trenton, FL 32693	■Remove
			□ Change
MGR T	Thomas Stankunas	6480 SE State Road 26	□Add
		Trenton, FL 32693	■Remove
			□Change
MGR Jonathan Basford	Jonathan Basford	6480 SE State Road 26	□Add
	Trenton, FL 32693	Remove	
			□Change
			□Add
			□Remove

• —	
-	
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ective	date, if other than the date of filing: (optional)
n effecti	ive 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
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
	11), KH. W23
ted	Mag 15th 2023
	1 1 2 IX
	Signature of a member or authorized representative of a member
	Fall Straken

Filing Fee: \$25.00