(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration to Filip Office
Special Instructions to Filing Officer.
1,25

Office Use Only



800435858038

09/03/24~-01036--023 \*\*80.00





September 12, 2024

ENRIQUE R ACOSTA ARAUZ 5253 VILLA ROSA AVE ST CLOUD, FL 34771

SUBJECT: APEX WATERPROOFING

Ref. Number: L24000040573

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

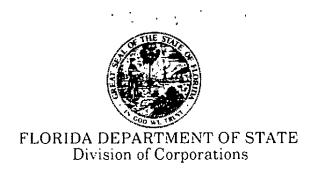
You may email the corrected documents or any questions you may have to Vonterica. Williams@DOS.FL.GOV. PDF Format only.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Vonterica S Williams
REGULATORY SPECIALIST II

Letter Number: 324A00020481



February 22, 2024

ENRIQUE R ACOSTA ARAUZ 5253 VILLA ROSA AVE SAINT CLOUD, FL 34771

SUBJECT: APEX WATERPROOFING

Ref. Number: L24000040573

We have received your document for APEX WATERPROOFING and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida profit corporation, but your entity is a ELE Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call, (850) 245-6050.

Letter Number: 524A00003966

Morgan E Lovett Regulatory Specialist II

www.sunbiz.org

## COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations			
	APEX WA	TERPROOFING			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.		
		indence concerning this matter			
Transcretain	an continu	notice concerning this matter	w me following.		
		Enrique R Acosta Arauz			
			Name of Person		
		Apex Waterproofing			
			Firm/Company		
		5253 Villa Rosa Ave			
			Address		
				77 038	57.17
			City/State and Zip Code		2024 SEF
		Saint Cloud Florida 34771			7
			to be used for future annual report noti	TALL/HASSEF	
For further in	nformation c	oncerning this matter, please c	all:	. T. ∪ 'n ="	
Enrique R Acosta Arauz		689 666-6404 at ( )	는	t.	
	Name o	f Person		e Telephone Number	
Enclosed is a	a check for th	he 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 tadditional copy is enclosed)	
	iling Addres		<u>Street Address:</u> Registration Se	ction	
Registration Section Division of Corporations		Division of Cor	porations		
P.O. Box 6327		The Centre of T	Callahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Apex Waterproofing		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Colorida document number <u>L24000040573</u>	ompany were filed on 01/22/2024	and assigned
This amendment is submitted to amend the following:	<u> </u>	
A. If amending name, enter the new name of the limi	ted liability company here:	
Apex Waterproofing LLC		
he new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
		<u> </u>
		74.S
Enter new mailing address, if applicable:		SEPT .
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		// / P
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	i office address on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	
	, Florid	a Zip Code
	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Enrique R Acosta Arauz	5253 Villa Rosa Ave	■Add
		Saint Cloud, FL 34771	□Remove
		_ <del></del>	□ Change
AMBR	Byron J Ramos Mejia	1909 PENFIELD ST	□Add
		KISSIMMEE, FL 34741	■Remove
			Change A SEP 19
AMBR	Juan J Umanzor Parada	708 GAZELLE WAY	TA SE
		KISSIMMEE, FL 34759	Remove :
			2: 32
			□Add
		<u></u>	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		<del></del>	□Remove
			Change

		<u>* ~ </u>		
		- 4 4		
				<del>.</del>
				<del></del>
			<u> </u>	- 20 - 21
		·	7 C K	2024 SEP
				- 19 - 19
			—————————————————————————————————————	<u>.</u> 5
				- 10
Effective date, if other than the date an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	specific and cannot be prior to does not meet the applicab	date of filing or more than	(optional) 90 days after filing.) Pursuant to ements, this date will not be	605.0207 listed as
record specifies a delayed effective d d is filed.	ate, but not an effective tim	e, at 12:01 a.m. on the e	arlier of: (b) The 90th day a	ifter the
	2024	0	_	
Dated September 19th		Just	<u></u>	

Filing Fee: \$25.00