## L24000060426

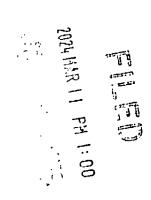
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	ERS UNLIMITED LLC			
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	CESAR A PEREZ			
		Name of Person		
	M.L. PAVERS UNUMIT	ED LLC		
		Firm/Company		
	15180 GEORGE BLVD			
	<del></del>	Address		
	CLEARWATER FLORII	DA 33760		
	nt - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	City/State and Zip Code		
	MANUEL.LIA89.COM			
	E-mail address: (	to be used for future annual report no	tification)	
For further information c	oncerning this matter, please co	all:		
CESAR A PEREZ		727 200-8003 at ()		
Name of Person		Area Code Daytir	ne 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 tadditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration	_	Street Address: Registration So	ection	
Division of Corporations		Division of Corporations		
P.O. Box 632		The Centre of		
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limi		iy as it now appears on out lability Company)	r records.)
The Articles of Organization for this Limited I. Torida document number 1.24000060426			
his amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name o	of the limited liabil	lity company here:	
M.L. PAVERS UNLIMITED LLC			
he new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	SAME AS ABOVE	
Principal office address MUST BE A STREI	ET ADDRESS)		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u> (BOX)</u>	SAME	P. 1: 00
B. If amending the registered agent and/or gent and/or the new registered office addressed of New Registered Agent:		ddress on our records	, enter the name of the new regist
-	15180 GEORGE	REVD	
New Registered Office Address:	17107 (12710)	Enter Florida stree	rt address
	CLEARWATAT		Florida <u>33760</u>
		City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

154 4 5 (1015) 0 1 (154) 1 1 4 (1010) 1 5 1 1 2 3

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>	Address	Type of Action
P	CESAR A PEREZ	15180 GEORGE BLV CLEARWATER, FL 33760	
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
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ffective date, if other than the	date of filing:	5/2024		(optional)	
an effective date is listed, the date must <b>Note:</b> If the date inserted in this blo					
ocument's effective date on the De					
record specifies a delayed effective	date, but not an effe	ctive time, at 12	:01 a.m. on the earli	er of: (b) The 90th day	after the
d is filed.					
Oated MARCH 3RD	2024				
Dated	·	·			
$\Omega$	1 0				

Typed or printed name of signee