Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : RC TAX SERVICE HC LLC

Account Number : I20200000165

Phone : (863)421-0617

Fax Number

: (407)520-5473

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ROYAL STAR CONCRETE LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

T. LEMIEUX

DEC - 3 2024

Electronic Filing Menu Corporate Filing Menu

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: ROYAL Stor Concrete LLC

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:

Lazaro d Arbobas

Name of Person

Lazaro a aubolasa

Finn/Company

4581 B19 Island dr

Address

M.SSIMMEE F1, 34746

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

L920r0 Arbolae2 at (407) 989 10 19
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

XI \$25.00 Filing Fee

☐ \$30.00 Filing Fee & Certificate of Status

S55.00 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

Royal Star Concrete  (Name of the Limited Liability Comp. (A Florida Limited)	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number <u>L2400062298</u> .	y were filed on $02/02/2024$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable:	oility Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	4581 B19 Island ar Kissimmer Fl. 37746
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	4581 BIJ (sland dr \$\frac{15}{2}\) Kissimmee, fl. 34AUG \$\frac{15}{2}\]
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: 4581 8	519 Sland dr Enter Florida street address
MISSIM	City Florida 34746 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.

7.	DIVISION	OF I	$\cap \cap \square$	MOLE	

From: RC TAX SERVICE

To. DIVISION OF CORPORATION Page: 4 of 5 2024-11-27 19 19:07 GMT 14075205473 From: RC TAX St 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>	Name	Address	Type of Action
	···		⊡Add
			□Remove
			Change
			□ Add
			□Remove
			☐ Chengo
		□Add	
			□Remove
			□ Chango
		□Add	
		□Remove	
			☐ Change
			☐ Add
	<del></del>	□Remove	
			□Change
<del></del>			□Add
			□Remove
			□ Change

Page: 5 of 5

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Note:	rive date, if other than the date of filing: 01-11-2024 (optional)  fective 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 (  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the reco	rd 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 iled.
Datec	11/01/2024
	Signature of a member or authorized representative of a member  Laron a arbo(aet  Typed or printed name of signee