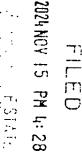


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COVER LETTER

TO:

Registration Section

Division	of Corp	porations		
	E REPA	AR AND MAINTENANCE L	I.C	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Arti	icles of .	Amendment and fee(s) are sub	mitted for filing.	
			-	
Please return all c	orrespo	ndence concerning this matter	to the following:	
		MAYLEN ALFONSO		
			Name of Person	
		D&E REPAIR AND MAI	NTENANCE LLC	
			Finn:Company	
		773 E 29TH ST		
		-	Address	
		HIALEAH FL 33013		
			City/State and Zip Code	
		MAYLENALFONSO@GN	IARL.COM To be used for future annual report not	(figurian)
For further inform	nation co	oncerning this matter, please c		The action of
MAYLEN ALFO)NSO		+1 305 481 41	45
Name of Person		at ()	ne Telephone Number	
Enclosed is a chec	ck for th	e following amount:		
☐ \$25.00 Filing	; Fee	■ \$30.00 Filing Fee & Certificate of Status	Ul \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing</u>			Street Address:	
Registr Divisio		orporations	Registration Section Division of Corporations	
P.O. Bo	ox 632	7	The Centre of	Tallahassee
Tallaha	issee, F	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 HOV 15 PH 4:28

D&E REPAIR AND MAINTENANCE 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 w	ere filed on 04/10/2024	and assigned
Florida document number 1.24000170375		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "L	LC" 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 ad agent and/or the new registered office address here:	dress on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
THE MEAN OF THE MARKET.	Enter Florida street add	ress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, ovided for in Chapter 60.	and I am familiar with and 5, F.S. Or, if this document is

If Changing Registered Agent. Signature of New Registered Agent

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
AMBR	DANIEL ALFONSO	773 E 29TH ST HIALEAH FL 33013	■ Add
			□Remove
			CChange
			□ Add
		 	□Remove
			□Change
		_	□Add
			□Remove
			□ Add
			□Remove
			□Change
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an eff <u>ofe:</u>	ive date, if other than the date of filing:
recor Lis fil	d 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 led,
	NOVEMBER 8 2024
ated	
ated	2 l. /mad/
ated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00