L24000 233/18

((Requestor's Name)	
,	(Address)	
•	(Address)	
((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
·	, ,	
	Document Number)	
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Certified Copies	Certificates of S	Status
		
Consist Instructions	A. Filing Officer	
Special Instructions	to Filing Officer.	
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COVER LETTER

TO: Registration Section Division of Corporations		
eun mat.	EZL Comcrete LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Arti	icles of Amendment and fee(s) are submitted for filing.	
Please return all o	correspondence concerning this matter to the following:	
	Ezequiel Dope 2 Name of Person	
	Name of Person	
	Firm/Company	
	8530 Laurel Ave	
	Pensacola FL 32534 City/State and Zip Code	
	Tope. ezequiel 16 @ gingil. com E-mail address: (to be used for future annual report notification)	
For further inform	nation concerning this matter, please call:	
E	Name of Person at (850) 619 - 9333 Area Code Daytime Telephone Number	
	ck for the following amount:	
1,525.00 Filing neck to: Fl De of	Certificate of Mattes	
Registr Divisio P.O. Bo	Address: ation Section Registration Section Division of Corporations Division of Corporations Division of Tallahassee Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

C

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compan	x as it now appears on our records.)
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L24000233118</u> .	were filed on 5/20/2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
EZL Concrete LLC	
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	Pensacola FL 3:2534
(Principal office address MUST BE A STREET ADDRESS)	Pensacola FL 32534
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8530 Laurel Ave Pensacola FL 32534
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new register</u>
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:	

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

company has been notified in writing of this change.

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 Type of Action **Address** <u>Title</u> Name | ____ □ Add _____ □Remove □ Add _____ □Remove _____ □Change _____ 🗀 Add □ Change ____ □Remove _____ Change ______ □Remove

____ □Change

	Only Changing the spelling of concrete".	
	Only Changing the spelling of concrete". It was misspelled, it should not say	
1	Comcrete" but rather, " concrete." Thank	
	чом.	
(If an effective Note: If t	date, if other than the date of filing:	
he record spord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th	٤
Dated	May 20 th 2024 X Eleaner Lopel Signature of a member or authorized representative of a member	
	X Eleaner rojer	
	Signature of a member or authorized representative of a member	
	Ezequiel Loge 2 Typed or printed name of signce	