## 12400023755/

(Requ	estor's Name)	)
(Addre	ess)	
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(City/S	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Na	me)
(Docu	ment Number	
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



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## **COVER LETTER**

	ition Section of Corporation	18			
		wall and Plastering L.	L.C		
SUBJECT:		Name of Lim	ited Liability Company		-
The enclosed Arti	cles of Amenda	nent and fee(s) are sub	mitted for filing.		
Please return all c	orrespondence c	concerning this matter	to the following:		
	Shel	sie Paqniagua			
			Name of Person		<del>_</del>
	Latir	american drywall and	i plastering IIc		filing Fee, ate of Status & d Copy al copy is enclosed)
			Firm/Company	* .	- 2:
	339	Elsic ave			
			Address		
	Dayt	ona Beach tl 32117			ASSE
			City/State and Zip Code		F. 10:
	latina	meridrywallplastering			الا 1918: <b>18</b>
For further inform	nation concernin	e-man address: ()	to be used for future annual repall:	ort notification)	,,,
shelsic Paniagua			863 332-9 at ()		
	Name of Person		Area Code	Daytime Telephone Numb	рег
Enclosed is a chec	ck for the follow	ring amount:			
□ \$25.00 Filing		0.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	dı Certific	Filing Fee, cate of Status & ed Copy all copy is enclosed)
	Address: ation Section		<u>Street Addr</u> Registratio		
Divisio	π of Corporat	ions	Division of	of Corporations	
	ox 6327	1.4		e of Tallahassee	010
ranana	ssee, FL 3231	l <del>4</del>	2413 N. IV	Ionroe Street, Suite	910

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Latin American Drywall and Plastering II  (Name of the Limited Lia (A Flo		y as it now appears on our reliability Company)	ecords.)	<del></del>
The Articles of Organization for this Limited Liabilit				_ and assigned
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liabii	lity company here:		
Latin American D.P.R. LLC				
The new name must be distinguishable and contain the words "	Limited Liabili	ty Company," the designation	"LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		339 Elsie Ave		(2) (2)
Principal office address MUST BE A STREET AL		Daytona Beach Fl 32117	1. ;	.a
			25.57	<u>.</u> .
			35. 25.	****
Enter new mailing address, if applicable:			S C C	A 111
Mailing address MAY BE A POST OFFICE BOX	2		.∵s Ti,	<u> </u>
				£
3. If amending the registered agent and/or registorgent and/or the new registered office address here.  Name of New Registered Agent:			nter the name o	f the new registe
222	9 Esie Ave			
New Registered Office Address:		Enter Florida street a	ddress	
Da	iytona Beach		_, Florida <u>32117</u>	
_	<del></del>	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 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>	Address	Type of Action
Owner	Shelsie Paniagua	339 Elsie Ave Daytona Beach Fl 32117	≅Add
			Remove
			□Add
			Remove
			Change
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ective date, if other than the date of filing:	(optional)	
effective date is listed, the date must be specific and cannot be prior to date of five: If the date inserted in this block does not meet the applicable statut	ling or more than 90 days after filing.) P	ursuant to 605.0
ument's effective date on the Department of State's records.	ory wing requirements, this dute in	n not be note.
cord specifies a delayed effective date, but not an effective time, at 12: s filed.	01 a.m. on the earlier of: (b) The 9	10th day after
ed June 4		
Sllion		

Filing Fee: \$25.00