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Office Use Only



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COVER LETTER

TO: Registration Section

Division of Cor	rporations			
Nic's & Oc	ampo Pavers/Truff, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Nicolas Flores			
		Name of Person		
		Firm/Company		
	2915 Riviera Drive			
		Address		
	Key West, Florida 33040			
For further information c	We-mail address: (City/State and Zip Code to be used for future annual report not all:	1260gmail.com	
Nicolas Flores		786 728-2585		
Name o	f Person	at ()Area Code Daytin	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 (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address		Street Address:	estion	
Registration 9 Division of C		Registration Section Division of Corporations		
P.O. Box 632	.7	The Centre of T	Γallahassee	
Tallahassee, 1	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 AUG 23 PM 3:06 Nic's & Ocampo Pavers/Turf, LLC (Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company) July 1, 2024 The Articles of Organization for this Limited Liability Company were filed on Florida document number L24000294366 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 2915 Riviera Drive Enter new principal offices address, if applicable: Key West, Florida 33040 (Principal office address MUST BE A STREET ADDRESS) 2915 Riviera Drive Enter new mailing address, if applicable: Key West, Florida 33040. (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 2915 Riviera Drive New Registered Office Address:

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.

City

Key West

Enter Florida street address

_. Florida ___

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
			□Add
			□Remove
			□Change
 			□Add
			□Remove
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			□Remove
			□Change

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reffective date is l te: If the date in	other than the date of filing:	5.0201 ted as
cord specifies a s filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
red	July 12 . 2024	
-/-/-	Signature of a member or authorized representative of a member	
• /	<i>y</i>	
	Nicolas Flores, Manager	

Filing Fee: \$25.00