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	Fax Number : (850)617-6383		P. 23
From:			EXS.
	Account Name : MENDEZ ACCOUNTAX	SERVICES, CORP	38.
eo 22≪	Account Number : 120060000145	, , , , , , , , , , , , , , , , , , , ,	
G 130	Phone : (305)769-4936		-71
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M.S. FINISH CARPENTRY, LLC.

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Eux: (820) 617-6383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



M.S. FINISH CARPENTRY, LLC.

(Name of the Limited	Liability Company as it now appears on our record	<u>5:</u>)
. (A	Florida Limited Liability Company)	

The Articles of Organization for this Limited Liability Company	were filed on _	OCT 30, 2024	and assigned	
Florida document number				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company l	<u>nere</u> :		
The new name must be distinguishable and contain the words "Limited Liability Limited Liability	ity Company," the	designation "LLC" 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)		<u></u>		
Grading duaress MAT BE A FOST OFFICE BOX				
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our	records, <u>enter the na</u>	ime of the new registered	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
			Zip Code	
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pubeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance o rovided for in	f my duties, and I an Chapter 605, F.S. O	n familiar with and r, if this document is	
If Chang	ing Registered A	gent, Signature of New 1	legistered Agent	

From: Dayana Molina

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Ewx: (820) 617-6383

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:oI

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
AMBR	ADALBERTO GIL	3180 NW 67 ST	Add
		MIAMI FL 33147	□Remove
			Change
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record spe is filed.	rcifies a delayed effective	date, but not an	effective time, (at 12:01 a.m. on th	ic earlier of: (b)	The 90th day after th	ie
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-		Signature of a mee	iber or authorized	representative of a	meniber		
		•	IGUEL SELAS				

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