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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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SB9/4/25

Fausi Abuassi

912 W Plymouth St, Tampa, FL 33603

Phone: 8402338829

Email: abuassifausi@gmail.com

Date: July 07, 2025

To:

Florida Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Subject: Articles of Amendment for DRYWALL & FRAMING LLC

I am submitting the enclosed Articles of Amendment form on behalf of my client for the LLC named DRYWALL & FRAMING LLC.

Enclosed is the completed form and a money order in the amount of \$25.00 for the filing fee. Should you require additional information or documentation, please contact me at the phone number or email listed above.

Sincerely,

Fausi Abuassi

On behalf of: DRYWALL & FRAMING LLC

COVER LETTER

TO: Registration S Division of Co			
	L & FRAMING LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Edin Jeovani Sagui Caal		
		Name of Person	
	DRYWALL & FRAMING	GLLC	202
		Firm/Company	ALCRE INTEREST
	4452 Lindsey Loop		
		Address	
	Dover, FL 33527		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	edin.sagui@gmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
Edin Jeovani Sagui Caa	ıl	813 5551234	
Name	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	ection
Division of Corporations		Division of Co	rporations
P.O. Box 63		The Centre of	
Tallahassee.	FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DRYWALL & FRAMING LLC				2025 3500 3500
(Name of the Lim	ited Liability Compa (A Florida Limited l	iny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited I Florida document number <u>L25000196809</u>	Liability Company	were filed on 04/25/	/2025	and assigned
This amendment is submitted to amend the fol	lowing:			.
A. If amending name, enter the new name of	of the limited liab	ility company here:		
DRY-WALI-&-FRAMING LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	nation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		4452 Lindsey Loop		· <u>-</u> -
(Principal office address MUST BE A STRE	ET ADDRESS)	Dover		
		FL 33527	· · -	
Enter new mailing address, if applicable:		4452 Lindsey Loop		
(Mailing address MAY BE A POST OFFICE	BOX)	Dover		
		FL 33527		
B. If amending the registered agent and/or agent and/or the new registered office addressed agent. Name of New Registered Agent:			rds, <u>enter the na</u>	me of the new registered
Nous Danietarad Office Address	4452 Lindsey 1	Loop		
New Registered Office Address:	<u></u>	Enter Florida	street address	
	DOVER		, Florida ²	33527
		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>	<u>Address</u>	Type of Action
MGR	Edin Jeovani Sagui Caal	4452 Lindsey Loop	
		Dover, FI 33527 US	□Remove
			□Change
MGR	TATIANA VARGAS	912 W PLYMOUTH	□Add
		TAMPA, FL 33603 UN	= Remove
			
			Remove
		□Change	
			□Remove
			□Change
			🗀 Add
			Remove
			□Change
			□Remove
			□Change

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i effec <u>te:</u> H	e date, if other than the date of filing:
cumei	nt's effective date on the Department of State's records.
s file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t d.
ted _	6/10/2025
u <u> </u>	ENG/2
	Signiture of a member or authorized representative of a member
	<i></i>

Filing Fee: \$25.00