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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE SALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TTV Construction of Florida LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jose VAlentin Name of Person
J&V ConstRution OF Floreds LLc Firm/Company
3450 PALENCIA Dr. Apt. 1614 Address
TAMPA F/. 32618 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jose Walertin at (787) 391-8746 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \text{Certified Copy} \text{(additional copy is enclosed)}\$\$ \text{Certified Copy} \text{(additional copy is enclosed)}\$\$

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAV Construction of Florida LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on 4124(15 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lial	bility company here:			
The new name must be distinguishable and contain the words "Limited Liab	oility 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)	NA			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.	office address on our records, <u>enter the name of the nev</u> re:			
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				
I hereby accept the appointment as registered agent and age provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	provided for in Chapter 605, F.S. Or, if this document is			
If Cha	anging Registered Agent, Signature of New Registered Agent			

Page 1 of 3

L'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 Title** Name 1 <u>Address</u> MRR Edilberto Diaz Aparts 13500 Turtle Wash Loge XAdd OR lando, FL 32837 - Change 2654 Copp Circle Madd AMER Luis Matos Kissinnee R 34744 - Remove ☐ Change □ Add ☐ Remove _□ Change □ Add ☐ Remove Change _□ Add ☐ Remove . <mark>~</mark>☐ Change

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ctive date, if other than t effective date is listed, the date i	he date of filing: _	.1 . 1 . 66	4 00 1	_ (optional)	D (05.00
e: If the date inserted in this	block does not meet	the applicable statute	ory filing requireme	ays aner ning.) nts, this date v	vill not be listed
iment's effective date on the	Department of State	's records.			
	red effective date	e, but not an effe	ctive time, at 1	2:01 a.m. d	on the earlier
ne 90th day after the r	ecord is filed.	2015			
ecord specifies a delay ne 90th day after the r	ecord is filed.	<u>2015</u>			
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ne 90th day after the r	ecord is filed.			SECRETAR :ALLAHASS	2015 SEP 1

Filing Fee: \$25.00