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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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SECRECIANT DESENTE

J. LEGGETT FEB 28 2018

COVER LETTER

Division of Co	rporations	,		
CUDIFOT.	APOLLO CONSTR	UCTION SERVICES LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		ELIZABETH ERNST		
	·	Name of Person		
	APOLLO CONSTRUCTION SERVICES LLC			
	Firm/Company			
	1281 SW 143RD AVE			
		Address		
	MIAMI, FL 33184			
	City/State and Zip Code			
		ACS.LLC21@GMAIL.COM		
		to be used for future annual report noti	fication)	
For further information	concerning this matter, please co	all:		
ELIZABETH ERNST		786 383-9437 at ()		
Name	of Person		e Telephone Number	
Enclosed is a check for	the 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:

TO:

Registration Section

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

APOLLO CONS	STRUCTION SERVICES LLC
(Name of the Limited Liability C (A Florida Lir	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com	npany were filed on 11/03/2015 and assigned
Florida document number L15000186542	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
APOLLO GENERAL SERVICES LLC	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRES	(22)
i incipal office address most be a street Abbres	. —
	B 1
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	夏市 0
	red office address on our records, enter the name of th
egistered agent and/or the new registered office address	s here:
Name of New Registered Agent:	
New Registered Office Address:	
non registered office radices.	Enter Florida street address
	Florido
	, Florida

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>	Name	Address	Type of Action
 			Add
			□ Remove
			Change
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ective date, if other than the date of filing:	(optional)
effective date, it offices that the date of fining. effective date is listed, the date must be specific and cannot be prior to the: If the date inserted in this block does not meet the applical	o date of filing or more than 90 days after filing.) Pursuant to 605.020
nument's effective date on the Department of State's records.	ore statutory triming requirements, this date with not be tisted a
record specifies a delayed effective date, but not he 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier of
ed FEBRUARY 21 2018	_·
(Alexatti TIL)	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00