## L18000144588

(Requ	iestor's Name)		
(Addre	ess)		
(Addre	ess)		
(City/s	State/Zip/Phon	ne #)	
PICK-UP	MAIT	MAIL	
(Busin	ness Entity Na	me)	
(Docu	ıment Number	)	
Certified Copies	Certificate	es of Status	
Special Instructions to Fil	ing Officer:		
Reject			

Office Use Only



800364355458

04/22/21--01011--024 \*\*25.00



June 8, 2021

MICHAEL FLOOD 491 W 36TH ST. RIVIERA BEACH, FL 33404

SUBJECT: MF CONSTRUCTION LLC

Ref. Number: L18000144588

We have received your document for MF CONSTRUCTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L21000160801.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 221A00012423

RECEIVED

## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration Division of C				
SUBJECT: MF CC	ONSTRUCTION LLC	. •		
,	Name of Lin	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing		
	spondence concerning this matter	<del>-</del>		
	Michael Flood			
	<del></del>	Name of Person	· · · · · · · · · · · · · · · · · · ·	
	MF CONSTRUCTION	ON LLC	٠.	
		Firm/Company		C)
	491 W 36th St.			· · · · · · · · · · · · · · · · · · ·
		Address		(X)
	Riviera Beach, FL3	3404	•	••
		City/State and Zip Code		
	E-mail address: (	to be used for future annual report noti	ating Home	es.LLC1@g
For further information	concerning this matter, please c		·	
Michael Flood		561 856-8012	2	
Name	of Person	at () Area Code Daytim	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)	Certified (	of Status &
<u>Mailing Addr</u> Registration		Street Address: Registration Sec	ction	
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of T	allahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MF CONSTRUCTION LLC				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our reco Liability Company)	<u>irds.</u> )		<del>_</del>
The Articles of Organization for this Limited Liability Company lorida document number <u>L18000144588</u> .	were filed on June 12, 20	)18	a	nd assigned
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited liab	vility company here:			
	nes LLC			
he new name must be distinguishable and contain the words. Emitted Liabi	lity Company," the designation "L	LC" or the	abbreviat	ion "L.L.C."
Inter new principal offices address, if applicable:	491 W 36th St		<u></u>	
Principal office address MUST BE A STREET ADDRESS)	Riviera Beach, FL 33	404 ·	154.	•
			:	· .
Inter new mailing address, if applicable:	491 W 36th St		•	
Mailing address MAY BE A POST OFFICE BOX)	Riviera Beach, FL 33	404		
3. If amending the registered agent and/or registered office	address on our records, ent	er the na	me of tl	ie new regis
gent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street add	'ress		
		Florida		
	City		7:	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>	Address	Type of Action
	·		
			□Change
			⊡Add
			□Remove
	ستند		□Change
			□Remove
			Change
			□Remove
			□Change
		<del></del>	∃Add
			□Remove
•	·		□Change
			□Add
			ПRemove
			□Change