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TO:

Registration Section

Division of Corporations	
SUBJECT: Alpha Construction General Contractors, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Alpha (pastaudia General Controctors, LLC) Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. a all correspondence concerning this matter to the following: Scott Parmley Name of Person Alpha Cantruction General Contractors, LLC FirmiCompany 420 5W 25 th Ave Out City/State and Lip Code Scottle alpha CGC COM E-mail address: (to be fised for future annual report notification) Information concerning this matter, please call: H Parmley Name of Person at (305) 389 - 4766 Daytime Telephone Number at check for the following amount: Filing Fee Certificate of Status Certificate Copy (additional copy is enclosed) Street Address: gistration Section	
Scott Parmley Name of Person	
Alpha Construction General Contractors, LL	<
420 5W 25th AVEOUR	
^	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Scott Parmley at 305 389 - 4766 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on $\frac{B}{3L}$ Florida document number <u>L</u> 20000 23 2567 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

New Registered Agent's Signature, if changing 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
MBR	Scott Parmley	420 500 25th Avenue	z 5Add
Remove	'P" and add	Fort Laudendale F)	□Remove
AMBR 		33712	A Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
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			□Remove
			□ Change
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			☐ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an ei Note:	tive date, if other than the date of filing:
he reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	6/2/2021
	Signature of a member of authorized representative of a member
	500++ Par M/e V Typed or printed name of signee