## L 21000516000

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SECRETARY OF STATE

C/ 4/30/2025

## **COVER LETTER**

TO: Registration Secti Division of Corpo						
SUBJECT: INTEGE	RAL INGENIERO	OS CONSUL	TORES U	SA LLC		
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.				
Please return all corresponde	ence concerning this matter to	the following:				
	Jose R. Tama	iyo				
		Name of Person				
	INTEGRAL INGEN	NIEROS CONS	ULTORES U	SA LLC		
		Firm/Company				
	8333 N.W. 53rd Street, Suite 450					
		Address	•	<del>-</del>		
	Doral, Florida 3	33166, USA				
	Jorge@tvicons	City/State and Zip Code		<del></del>		
E-mail address: (to be used for future annual report notification)						
For further information cond	cerning this matter, please cal	1:				
Jorge Forero		at (_346)	342-7589	-41		
Name of Pe	rison	Area Code	Daytime Telephi	one Number		
Enclosed is a check for the t	ollowing amount:					
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee Certified Copy (additional copy is en		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy (senclosed)		

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 MAR 21 PM 1: 38

SECRETARY OF STATE TALLAHASSEE. FL

## INTEGRAL INGENIEROS CONSULTORES USA LLC

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

	(A Fiorida Emmeu i	naomy Company)		
The Articles of Organization for this Limited Li	ability Company	were filed on $\frac{12/07}{2}$	<sup>2</sup> 021	and assigned
Florida document number L21000516006				
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
INTEGRALENG LLC				
The new name must be distinguishable and contain the w	ords "Limited Liabi	ity Company," the desig	nation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A		
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter was a Mine address if and looking		N/A		
Enter new mailing address, if applicable:		-		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
D. 16				
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office : ss here:	address on our reco	rds, <u>enter the nan</u>	ne of the new registered
	-			
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
New Neglacied Office Fidures.		Emer Florida	street address	
			Florida	
		Cuy		Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as pregistered office	performance of my provided for in Cha	duties, and Lam upter 605, F.S. Or,	familiar with and if this document is

N/A

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
N/A	N/A	N/A	□Add
			□Remove
			□Add
			□Remove
			©Change
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ective date, if other than the	date of filing: N/A		(optional)	
reffective date is listed, the date must te: If the date inserted in this blo	the specific and cannot be prior to sek does not meet the applicab	date of filing or more that le statutory filing requ	n 90 days after filing.) Pursuant to 6 frements, this date will not be li	05,0207 i sted as t
aument's effective date on the De	epartment of State's records.			
cord specifies a delayed effective s filed.	a date, but not an effective time	c, ut 12:01 a.m. on the	earlier of: (b) The 90th day af	ter the
March 17 ed	2025			
	0	2		
100				
	Signature of a member or authori.	zed representative of a m	ember	
Jose R. Tamayo, Manag	er'			
	Typed or printed	name of signee		