L23000210461

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COVER LETTER

то:	Registration Se Division of Cor			•
end te		IDING SOLUTIONS LLC		
SUBJE	u:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		MIGUEL MILEO		
			Name of Person	
		MILEO ADVISERS INCO	DRPORATED	
			Firm/Company	
		1265 APLEY CIR UNIT 3	03	
			Address	
		APOPKA, 32703		
			City/State and Zip Code	
		miguel@mileoadvisers.com		
		E-mail address: (to be used for future annual report not	ification)
For furt	her information c	oncerning this matter, please c	all:	
MIGUE	EL MILEO		407 9889189 at ()	
Name of Person				ne Telephone Number
Enclose	d is a check for th	ne 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 Registration S	Section	Street Address: Registration Sc	
Division of Corporations P.O. Box 6327			Division of Co The Centre of	•
	Tallahassee,			be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Company as it now</u> (A Florida Limited Liability Com	appears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed Florida document number $\frac{L23000210461}{L23000210461}$.	on 04/28/2023 and assigned
This amendment is submitted to amend the following:	any here:
A. If amending name, enter the new name of the limited liability compa	ny here:
ACE BUILDING SOLUTIONS LLC	130 mag
The new name must be distinguishable and contain the words "Limited Liability Company.	" the designation "LLC" or the abbreviation "L.L.C." "ESS
Enter new principal offices address, if applicable:	3
(Principal office address MUST BE A STREET ADDRESS)	 2
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 agent and/or the new registered office address here:	our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	ter Florida street address
En	ter rioriaa street aaaress
	. Florida
City New Productional Assert's Simultaneous Habitanian Productional Asserts	Zip 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
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change
			□Remove
			□ Change

CHANGED TO BUILDING.	<u> </u>		
PLEASE CORRECT.		····	
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			2023
			2023 JUN 30
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ective date, if other than the deflective date is listed, the date must be: If the date inserted in this blocument's effective date on the Department.	be specific and cannot be prior t ck does not meet the applica	o date of filing or more than 90 ble statutory filing requiren	(optional) days after filing.) Pursuant to 605.0 nents, this date will not be listed
cord specifies a delayed effective filed.	date, but not an effective tir	ne, at 12:01 a.m. on the earl	ier of: (b) The 90th day after t
JUNE 27TH ed	. 2023	_·	
	CONATT	AN MIGO.	

Filing Fee: \$25.00