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TO:		istration Sec sion of Corp		· · · · · · · · · · · · · · · · · · ·	
CY15. 10	~	Bob Pienta (Construction Mgmt., LLC		
SUBJI	ECT:		Name of Lim	ited Liability Company	<u></u>
The en	closed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return	all correspor	ndence concerning this matter	to the following:	
			Robert J. Pienta Sr.		
				Name of Person	
			Bob Pienta Construction M	fgmt., LLC	
				Firm/Company	
			3104 North Canal Drive		
Address					·
			Palm Harbor Florida 3468	84	
				City/State and Zip Code	
			pientaconstruction@gmail.c		
			E-mail address: (to be used for future annual report not	ification)
For fur	ther in	formation co	oncerning this matter, please ca	all:	
Robert	t J. Piei	nta Sr.		727 234-7685	
		Name of	Person	Area Code Daytir	ne Telephone Number
Enclos	ed is a	check for th	e following amount:		
= \$2:	5.00 Fi	ling 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 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**

Company as it now appears on our r Limited Liability Company)	acorde)
Limited Liability Company)	ecolus.)
ompany were filed on October 20th	h, 2004 and assigned
ed liability company here:	
ed Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
N/A	
ESS)	
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N/A	3 3 € 6
	3 3990
	# %S
	cords, enter the name of the ne
Enter Florida street o	nddress .
	, Florida
City _	Zip Code
	ed liability company here: ed Liability Company," the designation N/A N/A Pered office address on our recess here: Enter Florida street of

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

Title	<u>Name</u>	Address	Type of Action
MGR	Robert J Pienta Jr.	3104 North Canal Drive, Palm Harl	Add
		.	□ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			Add
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·			□ Remove
			☐ Change
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Effective da	te, if other than the d	ate of filing:			(ontional)	
li an effective d	late is listed, the date must b date inserted in this bloc	be specific and cannot	be prior to date of fil	ling or more than 9) days after filing.)	Pursuant to 60:
	ffective date on the Dep			,,, <u>,</u> , , , , , , , , , , , , , , , , , ,	,	
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Filing Fee: \$25.00