

L18000007823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

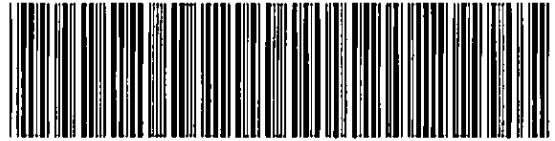
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 JAN 17 PM 1:08

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18 JAN 17 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. MILLIGAN
JAN 17 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Abraham Vargas Construction LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Neri Vargas
Name of Person

of

1016 Martha Av
Address

Tallahassee, FL 32305
City/State and Zip Code

nerivargas@29esmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Neri Vargas at (900) 354-2811
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
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| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
18 JAN 17 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Abraham Vargas Construction
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/17/2018 and assigned
Florida document number L19000007823

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)

4016 Marina Dr
Tallahassee FL 32305

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

City, Florida 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Neri Vargas	4016 Martha Dr	<input type="checkbox"/> Add
		Tallahassee, FL 32305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Abraham Vargas	4016 Martha Dr	<input checked="" type="checkbox"/> Add
		Tallahassee, FL	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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JAN 7 PM 1:15
18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated Jan 17, 2018.


Signature of a member or authorized representative of a member

Neri Vargas
Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA