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COVER LETTER

TO: Registration So Division of Cor			, •
Genesis Co	onstruction, LLC		
SOURCET.	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Julia Perez		
		Name of Person	
	Genesis Construction, LLC		
		Firm/Company	
	P.O. Box 396		
		Address	
	Placida, FL 33946-0396		
		City/State and Zip Code	
	julia@genesisconstructionIl		
For further information e	e-man address: (to be used for future annual report noti all:	ncation)
Julia Perez		813 299-4091	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailina Addroc		Sa 4.11	

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**

Genesis Construction LLC						
(<u>Name of the Lim</u>	ited Liability Compa (A Florida Limited)	iny as it now appears Liability Company)	on our records.)			
The Articles of Organization for this Limited	Liability Company	were filed on $\frac{07/1}{}$	9/2004	a	nd assi	gned
Florida document number L04000053498	·					
This amendment is submitted to amend the fol	llowing:					
A. If amending name, enter the new name	of the limited liab	ility company her	re;			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the de	signation "LLC" or th	e abbreviat	ion "L.L	.C."
Enter new principal offices address, if appli	10475 Sherman S	Street, Englewood, I	L 34224			
Principal office address MUST BE A STRE	** *	1-25-	ALEC MEC	2023		
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				ARY SSE	re	<u></u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u>Ma</u>	- } -	<u> </u>	
			<u>-</u>	FLORIDA	===	
				356	- <u>2</u> -	
B. If amending the registered agent and/or agent and/or the new registered office addr	ess here:	address on our re	cords, <u>enter the n</u>	ame of th	ie new	register
Name of New Registered Agent:	Jose R. Perez					
New Registered Office Address:	10475 Sherman			·	_	
		Enter Floria	da street address			
	Englewood		Florida			
		City		Zip	Code	

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 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
		······································	□Add
			□Remove
			□ Change
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Effective date, if other than the date of filing: [In a effective date, if other than the date of filing: [In a effective date, if other than the date of filing: [In a 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 605.02 More; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. Exercised a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the distribution of the filing of the statutory filing requirements, this date will not be listed document's effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the distribution of the filing o	· ·-			
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	- Jose P	Signature of Amember or authorized rep	resentative of a member	-
Julia Perez		,		
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Filing Fee: \$25.00