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## **COVER LETTER**

TO:	Registration Section Division of Corporations	e.				r. 4**	
SUBJ	) P.C.T.	CONSTRUC	T 1.	S			
SUBJ		Name of Limited	<del> </del>				
The en	nclosed Articles of Amendmen	it and fee(s) are submi	itted for fil	ng.			
Please	return all correspondence con	cerning this matter to	the follow	ing:			
		CARLOS	GER Name o	MAN	BRUN		
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For fu	rther information concerning t					,	
C/	ARLOS GERMAN	BRUN	at ( 2	105, 3	335-6	085	
	Name of Person					elephone Number	<del></del>
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□ \$2±		Filing Fee & tificate of Status	Certif	Filing Fee of the Copy ional copy	& is enclosed)	Certificate of Certified Contact (additional contact)	f Status &

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

CONST	eva uc	
( <u>Name of the Limited Liab</u> (A Flor	ility Company as it now appears of ida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability		09 2004 and assigned
This amendment is submitted to amend the following	g;	
A. If amending name, enter the new name of the		
The new name must be distinguishable and end with the		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	N/A	<u> </u>
(Principal office address MUST BE A STREET AL		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	·	4
B. If amending the registered agent and/or re registered agent and/or the new registered office a		records, enter the name of the new
Name of New Registered Agent:	N	A
New Registered Office Address:	·	
	Enter	Florida street address
		, Florida
	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** 1477 SW 14 TEPPACE MGRM LIZMARIE EGPARZA MIAMI, FL 33145 Remove Remove Remove Remove Remove

/ Aug
zed representative of a member

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Filing Fee: \$25.00