L08000011506

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SECRETARY OF STATE

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COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT:	35 CONSTRUCTION Name of Limit	W GROUP INTER	ENATIONAL, LLC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ERIC P	Name of Person	
	-	TRUCTION GROUP	INTERNATIONAL
		Firm/Company 79 th COURT Address	
	epitts Dib	City/State and Zip Code Scanstruction grotto be used for future annual report notification.	ouf. Com
For further information c	oncerning this matter, please ca	•	icanion,
ERIC P	77 5 f Person	at (305) 527- Area Code Daytime	8303 Telephone Number
Enclosed is a check for the	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 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

IBS CONSTRUCTION GROUP INTERNATIONAL, LLC (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 $\frac{2/19/2008}{2008}$ and assigned Florida document number <u>LO</u>8000017506 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 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: MIAMI , Florida 33015

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
MGR	PATRICK BRINSON	18781 NW 79th ct	
		MIAMI, FL 33015	Remove
			□ Change
			🗆 Add
			Remove
			D Change
			🗖 Add
			Remove
			Change
			Remove
			Change
			□ Add
			Remove
		ARASEE, F	Change
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fective date, if othen a cffective date is listed,	er than the date o	f filing:	prior to date of filing	or more than 90 days	optional) after filing.) Pursu	ant to 605.020
te: If the date insert	ed in this block doe	es not meet the ap	plicable statutory	filing requirements	, this date will n	ot be listed as
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record specifies The 90th day afte			not an effecti	ve time, at 12:	JI a.ni. on u	ie earlier o
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	Signatu	ire of a member or	authorized represent	tative of a member	お言い	Establishing.

Filing Fee: \$25.00

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