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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. | | | | | | | this | 23.933 | |
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| | To: | | • | • | | • | | | - |

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INSURE SAFE, INC/MARIA RODRIGUEZ (Account Number : 120160000047

Account Number : I20160000047 Phone : (305)267-4200 Fax Number : (305)267-4206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEW LINE CONSTRUCTION GROUP, LLC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| NEW LINE CONSTRUCTION GROUP, LLC | <u>. </u> |
|--|--|
| (Name of the Limited Liability Co | mpany as it now appears on our records.) ited Liability Company) |
| V = 1.1.1 = 2 | 1 |
| he Articles of Organization for this Limited Liability Comp | pany were filed on 2 1 18 and assigned |
| lorida document number L09000073625 | |
| his amendment is submitted to amend the following: | # |
| . If amending name, enter the new name of the limited | liability company here: |
| NEW LINE CONSTRUCTION & INVESTMENTS, LLC | 6.00 mm |
| he new name must be distinguishable and contain the words "Limited I | Liability Company," the designation "LLC" or the abbreviation "L.L.C." |
| The many principal officer address if and leakler | |
| Enter new principal offices address, if applicable: | 16 |
| Principal office address MUST BE A STREET ADDRESS | <u> </u> |
| | |
| | |
| Enter new mailing address, if applicable: | ţ. |
| Mailing address MAY BE A POST OFFICE BOX) | |
| | |
| | |
| | ed office address on our records, enter the name of the |
| registered agent and/or the new registered office address | <u>i here</u> : |
| • | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| Now Nogototo Ottles . Idadogo. | Enter Florida street address |
| | |
| • | . Florida |

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

MGR= Manager

3052674206

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| <u>l'itle</u> | <u>Name</u> | Address | Type of Action |
|---------------|-------------|---------|----------------|
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