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| Certified Copies        | _ Certificates    | s of Status |
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## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: MISAN CONSTRUCTION CONSCICTANTS, 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:   |
| CHARLES JACKSON  Name of Person   |
| Mijan Construction Consultants, LC  |
| P.O. BOX 7906<br>Address  |
| Wesley Chapel FL 33545 City/State and Zip Code  |
| Cjackson@mijanllc.co  E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| CVarus Jackson at (419) 297 · 0852  Name of Person Area Code Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 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

| MIJAN CONSTRUCTION (Name of the Limited Liability Comp  | on Consultants LLC  pany as it now appears on our records.)  This billity Company) |
|---|--|
| (A Florida Limited  | Liability Company)   |
| The Articles of Organization for this Limited Liability Company Florida document number                                   | y were filed on $April 7,2010$ and assigned  |
| This amendment is submitted to amend the following:   |  |
| A. If amending name, enter the new name of the limited lial   | bility company here:   |
| Mijan Construction 1 The new name must be distinguishable and contain the words "Limited Liab                             | LC   |
| The new name must be distinguishable and contain the words "Limited Liab  | oility 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)  | <u> </u>   |
|   |  |
|   | G PR   |
| Enter new mailing address, if applicable:   | P.O. BOX 7906= =   |
| Mailing address MAY BE A POST OFFICE BOX)   | Weslay Chapel FL=3.3545  |
|   |  |
|   |  |
| B. If amending the registered agent and/or registered or<br>registered agent and/or the new registered office address her |  |
| egistered agent and/or the new registered office address ne   | <u>rc</u> :  |
| Name of New Registered Agent:   |  |
| New Registered Office Address:  |  |
|   | Enter Florida street address   |
|   | , Florida  |
|   | City 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 Title **Address** Name | Type of Action \_ 🖸 Add ☐ Remove \_□ Change ☐ Remove ☐ Change □ Add □ Remove Change \_D Add \_□ Remove ☐ Change □ Add ☐ Remove \_ Change \_D Add \_D Remove

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| an offec<br>lote:   li | e date, if other than the date of filing:  |
|                        | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier or 30th day after the record is filed. |
| ated _                 | F83 1 2019   |
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|                        | Signature of a member or authorized representative of a member   |

Page 3 of 3

Filing Fee: \$25.00