

L10000079875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

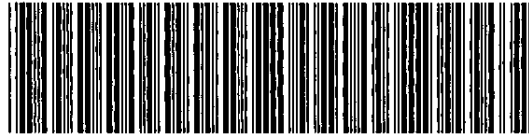
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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JAN 31 2013
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C Squared Structural Contractors, 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:

Jorge Castellanos

Name of Person

C Squared Structural Contractors, LLC

Firm/Company

7120 SW 47 St

Address

Miami, FL 33155

City/State and Zip Code

jorge@c2shell.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Castellanos

Name of Person

at (786) 236-5711

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

C Squared Structural Contractors, LLC

The Articles of Organization for this Limited Liability Company were filed on July 29, 2010 and assigned Florida document number L10000079875.

A. If amending name, enter the new name of the limited liability company here:

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:

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 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 Changing Registered Agent, Signature of New Registered Agent

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

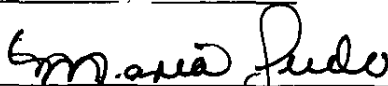
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Maria Castellanos	8530 SW 81 Lane	<input type="checkbox"/> Add
		Miami, Fl 33143	<input checked="" type="checkbox"/> Remove
MGR	Maria Agudo	735 SW 99 Court Circle	<input type="checkbox"/> Add
		Miami, Fl 33174	<input checked="" type="checkbox"/> Remove
MGR	Jorge Castellanos	8445 SW 76 Terrace	<input checked="" type="checkbox"/> Add
		Miami, Fl 33143	<input type="checkbox"/> Remove
MGR	Carlos Castellanos	8120 SW 89 Terrace	<input checked="" type="checkbox"/> Add
		Miami, Fl 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated January 18, 2013



Signature of a member or authorized representative of a member

Maria Agudo

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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