110000122197

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100354769921

11/12/28--01018--028 **25.80

DEC 1 7 2020

COVER LETTER

TO:	Registration S Division of Co		·	
SUBJE	BLUE BIS	SON CONSTRUCTION LLC	ı	4
COBOL		Name of Li	nited Liability Company	
The encl	osed Articles of	f Amendment and fee(s) are su	bmitted for filing.	
Please re	eturn all correspo	ondence concerning this matte	r to the following:	
		DANIEL P MULLAN		
			Name of Person	
		CITIBUILT, LLC		
			Firm/Company	
		1225 FRANKLIN AVE, S	STE 325	
			Address	
		GARDEN CITY, NY 115	30	
			City/State and Zip Code	
		dan@citibuilt.com		
For Godle	an tinda i ii iir		to be used for future annual report noti	itication)
ror turtn	er information c	oncerning this matter, please of	all;	
DANIEL	. MULLAN		917 771-4641 at ()	
	Name o	f Person		e Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$ 25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

£

BLUE BISON CONSTRUCTION LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	OV.
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 11/29/2010	and assigned I
This amendment is submitted to amend the following:		1,0
A. If amending name, enter the new name of the limited liab	ility company here:	
CITIBUILT, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	618 EAST SOUTH STREET	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 500	
	ORLANDO, FL 32801	
Enter new mailing address, if applicable:	1225 FRANKLIN AVE	
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 325	
	GARDEN CITY, NY 11530	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	aZip Code
	Chy	гір Сойе

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
			□ Add
			□ Remove
			□Change
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
 -			□Add
		 ,	□Remove
			□Change

-	
-	
•	
-	
-	
_	
-	
-	
-	
_	
-	
-	
-	
•	
-	
_	
Note:	ive date, if other than the date of filing:
f the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	NOVEMBER 07
	Signature of a prember of authorized representative of a member
	DANIEL P MULLAN
	Typed or printed name of signee

Filing Fee: \$25.00