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(Red	questor's Name)	
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(City	//State/Zip/Phone	#)
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J. SAULSBERRY EXAMINER

NOV 2 2012

From:		11/01/2012	11:54 #3	332 P.002/005
, , , , , ,	С	OVER LETTER		
TO: Registration Sec Division of Corp				
subject: <u>(OA</u> T <u>RU</u>	CLIONGSVMANTC Name of Limite	Himichtostechicoz fer d Liability Company	Saca (A	· L L C.
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.		
Please return all correspon	adence concerning this matter to	o the following:		
	RUBEN PAG	CHECO		
		Name of Person		
	TAXES AND ACC	COUNTING SOLUTION C	ORP	
	8249 NW 36	Finn/Company STH ST SUITE 120)-A	· ·
		Address	MLL	- SE
	DORAL FL	33166	Alla	
-	MAZEREDO@T.	City/State and Zip Code	SSEE	ARYON F
		be used for future annual report notification)		
	oncerning this matter, please ca		D,	1 ⁷⁷ 30
RUBEN P		at (<u>305</u>)502-4904 Area Code & Daytime Telephor	ne Number	
Name of	r eison			
Enclosed is a check for the	e following amount:			
\$25.00 Filing Fee	□S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy	atus &
Registr Divisio P.O. Be	ING ADDRESS: ation Section n of Corporations ox 6327 issee. FL 32314	STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301		

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>CONTRUCCIONES Y MANTEMIMENTOS TECNILOS FERSACA</u> C.A.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 10/24/17 and assigned Florida document number 17.000/3524.

This amendment is submitted to amend the following:

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

<u>OMSTRUCCIONES & MANDENIMICULTES TECLUICES FORSELA C. A. LLC</u> The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC.", CONSTRUCCIONES

Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: (Mailing address MAY <u>BE A</u> POST OFFICE BOX)

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	<u> </u>
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	<i>N</i> / A	
	Enter Florida	street address
	, F	lorida
	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

From:

From:

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	<u>Type of Action</u>
		····	Add
			Remove
		ALA	—
			_ Add
			_ Remove
			_
*	<u>-</u>		Add
		NIA	Remove
			ZNOY -
			Add
			Add Remove
		NIA	Add
			Remove
			_ Add
		NIA	Remove

, If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	NIA
ed	Kumber 15t 2012. Laver Jadum
	Signatore of a member of authorized representative of a member JOV OF UMMIN O VTyped or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00