L130000512



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COVER LETTER

Registration Section Division of Corporations

> Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

TO:

	structure Solutions Company, LLC		
30 3 3551		ited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are sub-	mitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
	Carlos Torres		
		Name of Person	
	Infrastructure Solutions Co	ompany, LLC	
_		Firm/Company	
-	14343 Commerce Way		
		Address	
	Miami Lakes, Florida 330	16	
	ctorres@infrasolcorp.com	City/State and Zip Code	
	-	to be used for future annual report notif	ication)
For further informa	tion concerning this matter, please ca	alt:	
Carlos Torres		305 788-9814	
	lame of Person	at ()	Telephone Number
Enclosed is a check	: for the following amount:		
□ \$25.00 Filing F	Fee S30.00 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)
. N	AAILING ADDRESS:	STREET/COURII	ER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Infrastructure Solutions Company, 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 01/02/2019 and assigned Florida document number L130000512 59 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 fain 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 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
MGRM	Edward Batista	4710 Ingraham Terrace Coral Gables, FL 33133	Add
			□ Remove
		Correct spelling of name to Edward Batista	Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			□ Change
			Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			☐ Change

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) All other information in registry stays the same
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· · · · · · · · · · · · · · · · · · ·	
(If an e	ctive date, if other than the date of filing:
If the re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	d October 11 2019
	Signature of a member or authorized representative of a member Carlos Torres

1.

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Typed or printed name of signee

Filing Fee: \$25.00