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| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer. | | | | |
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Office Use Only



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COVER LETTER

TO: Registration Section **Division of Corporations** Rivera Service Construction LLC SUBJECT: 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: Nelson Rivera Name of Person Rivera Service Construction LLC Firm/Company 1547 N Florida Mango Dr. Ste 10-1 Address West Palm Beach, FL 33409 City/State and Zip Code rivera.serv.const.llc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nelson Rivera Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee. □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ■ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy 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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| * | Rivera Service Construction LLC | . |
|--------------|--|------------------------------|
| '\ | (Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company) | <u>s.</u>) |
| | | N 01 |
| The Articles | of Organization for this Limited Liability Company were filed on 01/03/2014 | and assigned |
| | ment number 1.1.4()()()()()() | <u> </u> |
| | | ා දැ . |
| lhis amendn | nent is submitted to amend the following: | . => |
| A. If ameno | ling name, enter the new name of the limited liability company here: | |
| Rivera Const | ruction ELC | |
| The new name | must be distinguishable and contain the words "Limited Liability Company," the designation "LLC | or the abbreviation "L.L.C." |
| Entar naw r | orincipal offices address, if applicable: | |
| • | • | |
| Principal of | fice address MUST BE A STREET ADDRESS) | |
| | | |
| | | |
| Enter new n | nailing address, if applicable: | |
| | Iress MAY BE A POST OFFICE BOX) | |
| | Man (M.11 DD. 17 OD) OT 1702 DO. 17 | |
| | | |
| R Ifamenc | ling the registered agent and/or registered office address on our records, enter | the name of the new registe |
| | r the new registered office address here: | |
| | | |
| Na | ne of New Registered Agent: | <u> </u> |
| | | |
| <u>Ne</u> | w Registered Office Address: Enter Florida street address | ess |
| | | |
| | | orida |
| | City | z.ip с оае |

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 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 |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (optional) E. Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. record is filed.

If the record 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

Dated October 30 2024 Signature of a member or authorized representative of a member Typed or printed name of signee