L140000029260

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T. BROWN

COVER LETTER - * /

TO: Registration Sec Division of Corp	
SUBJECT: RO	da Builders Construction 22C Name of Limited Liubility Company
The enclosed Articles of A	amendment and fee(s) are submitted for filing.
Please return all correspon	dence concerning this matter to the following:
	Vairon D. Ruda Name of Person
	Loda Brilders Constrution L20
	25824 SN 128th ave.
	Homestead, Fl. 33032
	Homestead, Fl. 33032 City/State and Zip Code roda, builders, Construction, LlC & gmail.com E-mail address: (to be used for future annual report notification)
For further information co	ncerning this matter, please call:
Yairon Name of	Person at (305) 338 58 40 Area Code Daytime Telephone Number
Enclosed is a check for the	e following amount:
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

10
ARTICLES OF ORGANIZATION
OF AND
Roda Builders Construction UC (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 02/20/2014 and assigned Florida document number L14000029260
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: Name Stays the same The new name must be distinguishable and cold with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
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: Yairon I. Roda
New Registered Office Address: 25824 GW 128th ave
Name of New Registered Agent: New Registered Office Address: Yairon I. Roda
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.

nynging Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Man AMBR = Aut	ager horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MAIRON D. RODA	25824 SW 128thave	DF Add
		Homestead, FC. 33030) □ Remove
AR_	Karolina Bermudez	25824 SW Dethave Homestead, Fl. 3303	🗆 Add
		Homestead, 41. 3303	Remove
			□ Add
			□ Remove
			_
		**************************************	_□ Adđ
			_□ Remove
			— □ Add
		* **	_□ Remove
			🗅 Add
			Remove

amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
The effective	date, if other than the date of filing:
	2/24/14
	Signature of a member or authorized representative of a member AIRON D. RODA
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00