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DIVISION OF CORPORATIONS

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## **COVER LETTER**

TO: Registration Se Division of Cor			
O. O. I. C. D. D. C. C. C.	struction of Pasco, LLC.		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Andy Torres		
		Name of Person	
	Torres Construction of Pas-	co, LLC	
	<del></del>	Firm/Company	· · · · ·
	37610 Gaddis Ave.		
		Address	<del> </del>
	Dade City, FL. 33523		
		City/State and Zip Code	
	rhinogc@gmail.com		
	E-mail address; (I	to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	ill:	
Andy Torres		813 765-5408 at () Area Code Daytime	
Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 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)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.)  Limited Liability Company)	
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 enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:	and assigned	
This amendment is submitted to amend the following:	_	
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or	<u> </u>
Enter new principal offices address, if applicable:	·-·	<b>8</b> YISTO
Principal office address MUST BE A STREET ADDR	RESS)	
		9 07
Inter new mailing address if annlicable:		OF STARPORA
Mailing address MAY BE A POST OFFICE BOX)		5 3 TE
	<del></del>	<del></del>
		nter the name of the ne
Name of New Registered Agent:	16-0	
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
	City	гір Соае

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>	Name	<u>Address</u>	Type of Action
AMBR	Wilibaldo Torres	37610 Gaddis Ave	
		Dade City, FL. 33523	☐ Remove
			☐ Change
AMBR Edgar Torres	Edgar Torres	4346 CR 692	<u></u>
		Webster, FL. 33597	Remove
			Change
	<del></del>		
			□ Remove
		Change	
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		<del></del>	
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			☐ Change
			Add
			☐ Remove
			□ Change

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ective date, if other than the effective date is listed, the date mu te: If the date inserted in this b	e date of filing: _ ist be specific and ca	nnot be prior to	date of filing or le statutory fili	more than 90 d	_ (optional) ays after filing.) P	ursuant to 605. Il not be liste	i,02( ed a
cument's effective date on the D			·	5 ,			
record specifies a delaye The 90th day after the rec	d effective dat ord is filed.	e, but not a	an effective	time, at 1	2:01 a.m. or	the earlie	er o
ed May 24	·	2018	. •				
Chuly Vaxa							

Page 3 of 3

Filing Fee: \$25.00