Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((II150001273403)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Addount Name | | LICENSES ETC INC Account Number : 120070000159 Phone : (239)777-1028 Fax Number : (877)275-3593

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: etc@licensesetc.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TEKRAM CONSTRUCTION SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$25.00

(((H150001273403)))

COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: Tekram	Construction Services	HIC.			
	Name of Lim	ited Liability Company			
The enclosed Articles of a	Amendment and fee(s) are sub	emitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Lisa Adams		la rel le cale. De lago ago ago ago ago ad e de cale d		
		Name of Person			
	_Licenses, Etc.				
		Firm/Company			
	886 110th Ave. N.,				
		Address			三
	Naples, FL 34108		ਵੁੱਲ	क्र	SEC SISI
		City/State and Zip Code	19		오줌
	etc@licensesetc.c	om to be used for future annual report notifi		[2]	유됐-
			eumon) SHO		- COS
For further information co	oncerning this matter, please co	all:	巴尔	3	
Lisa Adams	'Parcan		777-8321		FATE PATIO
Nume of	1 (1301)	Area code Bayune	receptione rumoer		7
Fuclosed is a check for th	e following amount				
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee Certificate of St Certified Copy (additional copy is c	ntus &	

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 l'allahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

 $(((H15000127340\ 3)))$

Tekram Constructio		
(Name of the Limited Liability Compar (A Florida Limited I	y as it now appears on our records.) inbility Company)	And the best of the contract o
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000107466</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabi		and assigned
The new name must be distinguishable and contain the words "Limited Limit	ity Campaoy," the designation "11.C" at	the abbreviation "LLC"
Enter new principal offices address, if applicable:		300 13 50
(Principal office address MUST BE A STREET ADDRESS)		FÖ 3 GS
		- FE - S - S - S - S - S - S - S - S - S -
		SEE OF A CORPORATION OF THE CORP
Enter new mailing address, if applicable:		다음 AM 용명 등
(Mailing address MAY BE A POST OFFICE BOX)		- 5 - 1 - 5 - 1
	<u> </u>	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	Enter Florida strevi address	
	, Florid	8ZipCode
New Registered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete; accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I rovided for in Chapter 605, F.S.	am familiar with and Or, if this document is
If Chan,	ging Registered Agent, Signature of Ne	w 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:

 $(((H15000127340\ 3)))$

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
AM	∑ose Estrella	2 8 Fourth Street	
		Fort Mers, FL 33901	Remove
			Change
•••			Add
			□ Remove
			☐ Change
			
			□ Remove
			Change
			☐ Remove
			Change
			
		AL APASSEE FLO	SECRETARY OF STAIL OUVISION OF CORPORATIONS OF SECRETARY OF STAIL OUVISION OF CORPORATIONS OF SECRETARY OF STAIL OUVISION OF CORPORATIONS OF SECRETARY OF STAIL OUVISION OUVIS
		70 V	Romove RATION STATE Change In Change

Τα·	Sunbiz	HC	Amendment	Page 7	of 7
	OUTIDIZ		VIII CHÂH ICHT	raue /	01 /

			
			
		<u> </u>	
			
*			
			
			
			 -
			
			
			
fective date, if other than th	ne date of filing: ust be specific and cannot be prior to date of filing or no	(optional)	
n effective date is listed, the date mote: If the date inserted in this becomes is effective date on the f	block does not meet the applicable statutory filing	re than 90 days after filing.) Pursuant of requirements, this date will not be	o 605.0207 (3)(b t listed as the
	ad affactive dute, but not up affactive ti	me, at 12:01 a.m. on the e	arlier of:
			亞
The 90th day after the re	cord is filed.		SEVISION SEC
The 90th day after the re			NW G
The 90th day after the re	2015	(LANASS)	OI OFFI
record specifies a delaye The 90th day after the re ited May 27th	cord is filed.	Of a member 35	NW G

Page 3 of 3

Filing Fee: \$25.00