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SECRETARY OF STATE AT TALLAHASSEE, FLORIDA

JUL 1 1 2016 S. YOUNG

COVER LETTER

	Registration Section Division of Corpora		•		
SUBJEC	T: BARRA	BUILDERS	LLC		
			mited Liability Company		
The enclo	sed Articles of Ame	ndment and fee(s) are su	bmitted for filing.	·	
Please ret	urn all corresponden	ce concerning this matter	r to the following:		
	-	MARCE	Name of Person		
		BARR	A BUILDERS LIC		
	_		Firm/Company		16 7 SEC.
	_	36 ROY	AL LEAF LN Address		三 表型
		,	Address		9335 3355 3355 3355 3355 3355 3355 3355
	_	PALM	COAST , FL 3216	4	E. PLORIDA
			City/State and Zip Code		55
		•	TAVARES @ MAIL. C	-	JA;
For furthe	r information concer	rning this matter, please of			
· · · · · · · · · · · · · · · · · · ·	MARCELO			9988	
	Name of Pers	on .	Area Code Daytin	ne Telephone Number	
Enclosed i	is a check for the fol	lowing amount:			
□ \$25.00	0 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 Sta Certified Copy (additional copy is en	tus &

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

BARRA BUILDERS	- -
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 14000175608</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabi	were filed on
The new name must be distinguishable and contain the words "Limited Liabil	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4601 E MOODY BLVD # 554
(Principal office address MUST BE A STREET ADDRESS)	BUNNELL, FL 32110
	N /A
Enter new mailing address, if applicable:	N/A = F
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as peteing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is
If Chan	N /A ging 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 **Title Address Type of Action** Name ARNALO C PEREIRA JR. MGR Z Add 36 ROYAL LEAF LA ☐ Remove PALM COAST, FL 32164 ☐ Change 36 ROYAL CEAF UN. FRANCINE T SILVA AMBR Add PAUM COAST, FL 32/64 ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove Change □ Add □ Remove _☐ Change

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ote: If	date, if other than the date of filing:	ptional) ifter filing.) Pursuant to 605.020 this date will not be listed as
	d specifies a delayed effective date, but not an effective time, at 12:0 oth day after the record is filed.	1 a.m. on the earlier o
ted	JULY 6 TH , 2016. Signature of a member or authorized representative of a member	
	Marse.	

Page 3 of 3

Filing Fee: \$25.00