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(((H150000614093)))



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CANDIMAC CONSTITUTION, LLC

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Electronic Filing Menu

Corporate Filing Merg

COVER LETTER

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SUBJECT:	CANDIM	AC CONSTITUTION, LLC			
		Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclose	d Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.	,		
			Firm/Company		
	100 W. Broadway Suite 100				
			Address	15 5 5	
		Glendale, CA 91210		58 3	-
			City/State and Zip Code		711
		candimachak@gmail.com			
For further i	nformation co	e-mail address: ()	to be used for future annual report notifi all:		: 5
lmelda Va	squez	_	323 962-8600 ex	t 7950 臭雨 8	20 11
	Name of	Person	at () Area Code Daytime	Telephone Number	
Enclosed is:	a check for th	e following amount:			
□ \$25.00 f	Filing Fee	S30.00 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)	
	3.4 4 27 2	NC ADDRESS.	CTRRET/OAUNYE	en annorge	

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

CANDIMAC CONSTITUTION, I	LLC	
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our re Florida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liab Florida document number <u>L15000028749</u>	oility Company were filed on 02/16/2015	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	-100 th
CandiMac Construction LL.C		EG _
The new name must be distinguishable and end with the wo	ords "Limited Liability Company," the designation	"L1.C" or the abbreviation EL.L.C.
Enter new principal offices address, if applicab	ole:	建三后
(Principal office address MUST BE A STREET.	ADDRESS)	한당 = 므
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	58 59 50 50 50 50 50 50 50 50 50 50 50 50 50
B. If amending the registered agent and/or registered agent and/or the new registered office		ords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Park Plani I ama a I	J.
	Enter Florida street address	
		Florida
	City	Zip Code

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

To: Page 5 of 6

3/10/2015 3:58:05 PM PDT

13239628300 From Krishna Desai

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

<u>`itle</u>	Name	Address	Type of Action
			□ Add
			· _ □ Remove
			
			- Remove -
			O Add
			Add S
			Remove
			☐ Remove
			Add
			Remove
			□ Add
			П Кеточе

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		_
		_
		_ _
(The ef	ctive date, if other than the date of filing: (optional) flective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after	
Dates	ate this document is filed by the Florida Department of State) d March 04, 2015	
	Candice Machae	
	Signature of a tournber or authorized representative of a member Candice Machak	.
	Typed or printed name of signee	TER T
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Filing Fee: \$25.00