L15000078773

(Re	equestor's Name)	
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2015 MAY 26 AH 4: 32

J. HARRIS

COVER LETTER

	vision of Co		• .	
SUBJECT:		TRUCTION LLC		
obsize i	•	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
		ZULMA B PINEDA		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		BBJ CONSTRUCTION L	LC	
		**************************************	Firm/Company	· ·
		5342 KEYTONE DR N		
			Address	.
	•	JACKSONVILLE, FL 322	207	
		to the total desired to the to	City/State and Zip Code	***************************************
		info@zorrofinancial.com		
		E-mail address: (to be used for future annual report no	otification)
or further i	information c	oncerning this matter, please co	all:	
ZULMA B	PINEDA		904 405-7075 at ()	
	Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed is	a check for ti	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

BBJ CONSTRUCTION LLC.		
(Name of the Limited Lis (A Flo	ability Company as it now appears on our records. orida Limited Liability Company))
The Articles of Organization for this Limited Liabilit	ty Company were filed on 05/05/2015	and assigned
Florida document number L15000078773		-
This amendment is submitted to amend the following	g.	
A. If amending name, enter the new name of the	limited liability company here:	
MAGNO CONSTRUCTION LLC.		
The new name must be distinguishable and contain 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 AL	ODRESS)	
		2015 ALL
Enter new mailing address, if applicable:		CRE LAH
(Mailing address MAY BE A POST OFFICE BOX)	3	TARI ASSI
Transaction of the state of the	2	111 2
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records.	enter the name of the new
registered agent and/or the new registered office a	address here:	9 7
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	, Flor	id a
	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

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
	NATIONAL SECTION CONTRACTOR CONTR		Add
			☐ Remove
		<u> </u>	Change
			Add
		ESPECIAL AND A SECOND AND A SECOND ASSESSMENT AND A SECOND ASSESSMENT ASSESSM	□ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Add
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			Add Add Add Add Add ASSEE FLORID
			APRIO Remove
			SSE Change
			5 Add 22
			□ Remove
			□ Change

Effective date, if other than the date of filing: (If an offective date is listed the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 1 The 90th day after the record is filed. Dated MAY 18 2015 Sugnafire of a member or authorized representative of a member Typical or printed name of signee Page 3 of 3	. If amending	any other information, ente	er change(s) here: (Attach additional sheets, i	f necessary.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Dated MAY 18 2015 Signalure of a member or authorized representative of a member Typed or printed name of signee Typed or printed name of signee	,			
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The 90th day after the record is filed. Dated MAY 18 Signature of a member or authorized representative of a member Zu/ma B Pineda STyped or printed name of signee Typed or printed name of signee	Note: If the da	ate inserted in this block does n	ot meet the applicable statutory filing requirement	(optional) s after filing.) Pursuant to 605.0207 (s, this date will not be listed as th
Signature of a member or authorized representative of a member Zu/ma B Pineda SR 28 Typed or printed name of signee				01 a.m. on the earlier of:
Typed or printed name of signee SR 28	Dated MAY I	8	2015	
Typed or printed name of signee SR 28		3		201
Typed or printed name of signee		Zu/ma B	Pineda	26 158
				AM L:

Filing Fee: \$25.00