## L15 0000 87951

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(Ad	idress)	
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## **COVER LETTER**

Divi	ision of Corp	porations		
SUBJECT:		LD CONSTRUCTION ENTE	RPRISES LLC	
		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		JUAN F ZELAYA		
			Name of Person	
		MEGABUILD CONSTRU	JCTION ENTERPRISES LLC	
			Firm/Company	<del></del>
325 SOUTH BISCAYNE BLVD. APT 3424				
			Address	
		MIAMI, FL 33131		
			City/State and Zip Code	
		MEGABUILDENTERPRIS	-	
		E-mail address: (	to be used for future annual report notifi	cation)
For further in	formation co	oncerning this matter, please ca	all;	
JUAN F ZEI	LAYA		786 397-5784 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 Fi	iling 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:

TO: · Registration Section

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

## MEGABUILD CONSTRUCTION ENTERPRISES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 05/12/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	vility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	te abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:	<u>e</u> :	ter the name of the no
	Enter Floridu street address , Florida	E P
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		DA ·
I hereby accept the appointment as registered agent and agr 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 company has been notified in writing of this change.	performance of my duties, and I a provided for in Chapter 605, F.S. (	m familiar with and Or, if this document is
If Cho.	nging Degistered Agent Signature of New	Pagistared Acoust

. 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>	<u>Name</u>	Address	Type of Action
AMBR	JORGE ALBERTO MEDINA	6205 SW 131ST COURT	<u></u> ■ Add
		APT 102 MIAMI, FL 33131	Remove
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Page 3 of 3

Filing Fee: \$25.00