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To:

Division of Corporations

Fax Number

: (850)617-6383

Prom:

Account Name : EPGD ATTORNEYS AT LAW, P.A.

Account Number : I20140000049

: (786)837-6787

Phone Fax Number

: (305)718-0687

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

Brail Address: Prica pedian. con

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Registration Section

TO:

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COVER LETTER

Division of Cor	porations		
INTERNAT	FIONAL ESTIMATING, LLC		
SOBJECT:	Name of Limi	ied Limbility Company .	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Eric P. Gros-Dubois		
		Name of Person	
	EPGD Attorneys at Law		
		Firm/Company	
	2701 Ponce De Leon Bivd.	., Suite 202	
		Address	
	Coral Gables, FL33134		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	eric@epgdlaw.com		
		to be used for future annual report notifica	(noi
For further information of	oncerning this matter, please co	all:	
Eric P. Gros-Dubois		786 837-6787	
Name o	f Person		elephone Number
			•
Enclosed is a check for the	he following amount:		
S25.00 Filing Fee S25.00 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

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

INTERNATIONAL ESTIMATING, L	=			
(Name of the Limited I	Jability Company Florida Limited Lic	/ as it now appears on buity Company)	our records.)	
The Articles of Organization for this Limited Liabi Florida document number £15000106976	lity Company w	vere filed ön <u>6/24/15</u>	5	and assigned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of th	e limited liabili	ty company here:		
The new name must be distinguishable and contain the word	s "Limited Liability	y Company," the design	nation "LLC" or the abbrev	rimion "L.L.C."
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>x)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered office			ır records, <u>enter the</u>	name of the nev
Name of New Registered Agent:		<u>, 5</u> 7.		
New Registered Office Address:		Enter Florida	street address	
			, Florida	· <u></u>
		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	1
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	State of	
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LOT

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	Name	Address	Type of Action
MGR	Munsoor-ur-Rahmaan	1 - Thorton Road, Patiala Ground	
		Luhore, Pakistan, 54000	☐ Remove
			Change
	·		Remove
		.3h.	Change
		<u> </u>	□ Add
			Remove
			□ Change
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			FILED FILED AM AN
	Page 2	2 of 3	AHES: 23

	
	
	
tive date, if other than the date of filing: If continue date is listed, the date must be specific and cannot be prior to date of filing or more than 90 to 1 if the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	_(optional) ays after filing.) Pursuant to nts, this date will not be
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