L15000130344

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





400375888584

11/04/21--01006--014 *25.00

2021 NOV -4 PM 3: 21

Y. SCOTT NOV 1 4 2021

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	MR BUILD CON	STRULTION	
Subdict.		nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
			20:
	4	EZRA SMITH	Han 21
		Name of Person	2021 NOV -4 PM 3: 2 SECLESS SECURIA SE
	MR	BUILD CONSTRUCTS	
		BULLD CONSTRUCTS Firm/Company	MO PA
	422	JALKSON ST	3: 28
		Address	
	DUNE	02N FL 34698	
		OZN FL 34698 City/State and Zip Code	
	E-mail address:	LOCONS TRUCT JON Q YAA	roo. com
For further information	concerning this matter, please c	call:	
EZRA	SM 17/1	at (727) 638 - 6	0706
Name	of Person	at (727) 638 - (Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:	·	
12 \$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 Addr Registration		Street Address: Registration Sec	tion
_	Corporations	Division of Corp	
P.O. Box 63	-	The Centre of Ta	
Tallahassee.		2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MR BUILD	LONS TRULTZON	re on our records)	-,
(Name of the Limited Liability (A Florida	Limited Liability Company)	is yn ydt (ctorus)	
The Articles of Organization for this Limited Liability C	ompany were filed on	7/30/2015	and assigned
Florida document number 15000130344	 ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ited liability company he	<u>ere</u> :	
		£0.	20
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the d	lesignation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			77
(Principal office address MUST BE A STREET ADDR	RESS)		<u> </u>
		65:05 07:07 07:07	
		(10) 건물	ယ္ ^(၂)
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered	d office address on our r	ecords, enter the name	of the new registere
agent and/or the new registered office address here:			
N. CN. D IA .			
Name of New Registered Agent:	,	•	·
New Registered Office Address:		.,	
	Enter Floi	rida street address	
	Circ	, Florida	Zip Code
	City		лір Соае

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR AMUR	NASH PERMENTER	521 MANDALAY AVE #403	thad
		_ CLEARWATER BEACH , FL 33767	□Remove
110 (0			□Change
MGR AMBAR	ZEPHZN SMITH	29737 67TH WAY N	BAdd
		LLEARWATER, FL 33761	□Remove
			□Change
			□Add
			Remove Remove Remove
			<u> </u>
			Change
			□Add
			□Remove
			□ Change
		<u> </u>	□Add
			□Remove
			Change

		_
		_
		_
		_
		_
		_
		_
	2021 SEC T/	_
	NON IL	- 7)
		ii ≃-
		`
	MS w D	!
	28 TTF	
		_
		-
		-
fective date if other than the date of filing.	(ontional)	
fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or other. If the date inserted in this block does not meet the applicable statutory filing.	more than 90 days after filing.) Pursuant to 60	5.02
cument's effective date on the Department of State's records.	ing requirements, this date will not be in	icu :
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. is filed.	on the earlier of: (b) The 90th day aft	er th
ted SEPTEMBER 27 2021		
Signature of a member or authorized representativ		