115000 208564

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Ĉit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B u	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400323731814

01/24/19-01014-023 **25.00

19 JAN 24 MI 8: 21

JAN 31 2019 S. YOUNG

COVER LETTER

	egistration Sec vision of Corp			s.	,	
SUBJECT	Diniz Construction LLC					
SUBJECT: Name of Limited Liability Company						
The enclose	ed Articles of A	umendment and fee(s) are subr	nitted for filing			
Please retur	n all correspon	dence concerning this matter t	to the following:			
		Govinda Diniz				
		Dinizeonstruction LLC	Name of Person			
Firm/Company 5605 nw 202 pl						
		Lacrosse FL 32658	Address			
	City/State and Zip Code dinizeonstruction@gmail.com					
			o be used for future annual re	eport notification)	1	
For further	information co	ncerning this matter, please ca	dl:			
Govinda D	iniz		386 8530 at ()	0200		
	Name of	Person	Area Code	Daytime Teleph	ione Number	
Enclosed is	a check for the	e 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 radditional 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

Diniz Construction 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 were filed on $\frac{12/16/2015}{1}$ _____ and assigned Florida document number L15000208564 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Narayana Linhares Name of New Registered Agent: 5605 NN JOD PL tacrossc

Enter Florida street address

Lacrossc Florida 32658

City Zip Code New Registered Office Address:

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Narayana Linhares	5605 NW 202 pl, Lucrosse FL 32658	9 . 11
			☐ Remove
			□ Change
			Remove
			□ Change
			
			Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			□ Change

	1
•	'
•	
•	
	
	
	01/22/2010
E. Effect	ive date, if other than the date of filing:
(If an ef Note:	fective 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 (3)(b). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Stendard of a member
	organisme of sentention obtaining representative of a member
	(7- riada Dini-
	Typed or printed name of signice

Page 3 of 3

Filing Fee: \$25.00