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COVER LETTER

Division of Cor	porations		
	CONSTRUCTION EXPERTS	, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christina Lucht, FRP/Bruc	e E. Loren, Esq.	
		Name of Person	
	Loren & Kean Law		
		Firm/Company	
	7111 Fairway Drive, Suite	302	
		Address	
	Palm Beach Gardens, FL 3	3418	
		City/State and Zip Code	
	jenni@mcexperts.net		
	E-mail address: (I	o be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	ill:	
Christina Lucht, FRP/Br	uce E. Loren, Esq	561 615-5701 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	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:

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

MODERN CONSTRUCTION EXPERTS, LLC

(<u>Name of the Limited Liab</u> (A Flori	ility Compan ida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Florida document number L16000003723	Company v	vere filed on 1/6/2016	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liabil	ity company here:	
The new name must be distinguishable and contain the words "Li	imited Liabilit	y Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		3141 SE Dominica Terrace	
(Principal office address MUST BE A STREET ADD	DRESS)	Stuart, FL 34997	
			<u> </u>
Enter new mailing address, if applicable:		3141 SE Domínica Terrace	THE STATE OF THE S
(Mailing address MAY BE A POST OFFICE BOX)		Stuart, FL 34997	
B. If amending the registered agent and/or reg	-		nter the name of the r
Name of New Registered Agent:			
New Registered Office Address: 3141	l SE Domini	са Теттасе	
New Registered Office Address.		Enter Florida street address	
Stua	art	Florid	34997

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
VP	Jhovanna Negron	3141 SE Dominica Terrace	8
		Super EL 24007	■ Add
		Stuart, FL 34997	Remove
P	Luis David Fernandez, Sr.	3141 SE Dominica Terrace	
		Stuart, FL 34997	Add
			Remove
			E Change
			☐ Remove
			Change
			☐ Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			Change

<u>Note</u>	ctive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier see 90th day after the record is filed.
Date	d -tex 114-00 2019
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Date	
Date	
Date	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00