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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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D SCOTT AUG 7 2017

## **COVER LETTER**

TO: Registration Section Division of Corporation	rations			
SUBJECT:	1 New C	ONCEDT Builds	ers LLC.	
The enclosed Articles of Art	nendment and fee(s) are sub	mitted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
	t	Name of Person  Firm/Company		,
	25/3 Migu	N.W. 72 rd Ale Address i, P.L. (33+90) City/State and Zip Code	Suite A Stranger of 1975	うのスプ
For further information cond	E-mail address: (	to be used for future annual report notific		
Hector 1 Name of Pe	Monje erson	at <u>786</u> , <u>326 A</u> Area Code Daytime	ZO/Z Telephone Number	
Enclosed is a check for the t  \$25.00 Filing Fee	ollowing amount: □ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing, Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	ここのう
Registration of Division of P.O. Box	f Corporations	STREET/COURIE Registration Section Division of Corporal Clifton Building 2661 Executive Cen Tallahassee, FL 3230	R ADDRESS:	

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on  $\frac{1-14-2016}{2016}$  and assigned Florida document number L16 00000 \$300 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 "L.L.C." 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street 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

If Changing Registered Agent, Signature of New Registered Agent

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 amending a or removed for	Authorized Person( com our records:	s) authorized to	manage, enter the title, name, and address of each person being add
MGR = Ma AMBR = Au	nager thorized Member		
Title	<u>Name</u>		Address Type of Action
(AMBR) (Member	Adriana	PANLA	2513 NW 72 -d Ave. ste A - Add
			<u>2513 NW 72</u> -d Ave. ste A □ Add Miami Fl. 33122 × Remove
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ii circuit c date is noted, ti	ie date mast be specific t	and camior of pricepto de	ite of filing or more than 90 da statutory filing requiremen	ys after filing.) Pursuant to 60	05.02 sted
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record specifies a The 90th day after	delayed effective	ate, but not ar	n effective time, at 12	:01 a.m. on the ear	lier
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- 1	I THE		d representative of a member		<u></u>

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Filing Fee: \$25.00