Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230003288373)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LICENSES & PERMITS LLC

Account Number : I20210000155 Phone : (305)226-8727 Fax Number : (305)226-8767

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1ST A.R CONSTRUCTION L.L.C

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SEP 20

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Help

CHILLIAN BOLDERS

j.

## **COVER LETTER**

TO:	Registration S Division of Co	ection rporations		
SUBJE	IST A.R.C	CONSTRUCTION L.L.C		
		Name of Lin	nited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		LUCIA ESTRELLA		
			Name of Person	
		LICENSES & PERMITS		
			Firm/Company	
		8300 WEST FLAGLER S	Т	
			Address	
		MIAMI, FL 33144		
		LICENSES114@GMAIL.C	City/State and Zip Code	
		•	to be used for future annual report noti	fication)
For furth	er information c	oncerning this matter, please c	all:	·
LUCIA	ESTRELLA		305 226-8727	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>®</b> \$25.	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 (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address	
	<u> </u>
Name of New Registered Agent:	<del>-0</del> 1
	÷
agent and/or the new registered office address here:	
B. If amending the registered agent and/or registered office address on our records, enter the name	⇒ c of the new registere
<u></u>	-1
TARRICK ORDI ESS TEAT DE A FUST UF FILE BUX	
Mailing address MAY BE A POST OFFICE BOX)	<del></del>
Enter new mailing address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new principal offices address, if applicable:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
A. If amending name, enter the new name of the limited liability company here:	
This amendment is submitted to amend the following:	
Florida document number L16000015675	and assigned
The Articles of Organization for this Limited Liability Company were filed on 01/22/2016	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
(Astine of the Children Clapitity Company as it now appears on our records.)	<del></del>

## 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

Zip Code

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	<u>Name</u>	Address	Type of Action
MGR	DAVIS, TIMOTHY JOHN	607 MISSIONWOODE DR.	Tendo
		SEFFNER, FL 33584	□Remove
			□Change
			DAdd
			Remove
			Change
			□Add
			Remove
			□ Change
	<del></del>	<del></del>	
			Remove
			☐ Change
	<del></del>		DAdd
			Remove
			□Change
			□ Add
			□Remove
	•		Change

Effective date, if other than the date of filling:  O9/18/2023 ((If an effective date, is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filing.) Pursuant to 605.00  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filled.  Dated  SEPT. 18  2023  Signature of a member or authorized representative of a member.							<b>-</b>	
Effective date, if other than the date of filing:  O/18/2023  ((if an effective 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 605.0.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.  Dated  SEPT. 18  2023								
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Effective date, if other than the date of filing:  O9/18/2023  (optional)  (if an effective 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 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.  Dated  SEPT. 18  O2023					-			
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Effective date, if other than the date of filing:  (optional)  (If an effective 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 605.03  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed.  Dated SEPT. 18								
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Signature of a member or authorized representative of a member	Dated	SEPT. 18	Asto.	<del>)</del> ' —	·			
			Signati	ne of a member o	r authorized repres	entative of a membe	r	·