LIL 0000 31562

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TO:	Registration Sec Division of Corp			
SUBJE		RUCCION, LLC		
SOBJE	C1	Name of Limit	ed Liability Company	
		Amendment and fee(s) are subm		
i icase i	etum an correspon	MERALDO DIAZ	o the following.	
			Name of Person	
		DJS CONSTRUCTION, LL	.C	
			Firm/Company	
		2721 MYAKKA DRIVE		
			Address	
		ORLANDO, FL 32839		
			City/State and Zip Code	
		MERALDOD@GMAIL.CO		
		E-mail address: (to	o be used for future annual report	notification)
For fur	ther information co	oncerning this matter, please ca	11:	
MERA	LDO DIAZ		321 356-4978	
	Name of	f Person	Area Code Day	ytime Telephone Number
Enclos	ed is a check for th	ne following amount:		
= \$2:	5.00 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: 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

DIS CONSTRUCTION, LLC						
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	any as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L16000031562}{L16000031562}$.	were filed on 02/15/2016	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	oility company here:					
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	e abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	2721 MYAKKA DRIVE					
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32839					
Enter new mailing address, if applicable:	2721 MYAKKA DRIVE					
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32839	5				
B. If amending the registered agent and/or registered of	ffice address on our records, en	SS 80 of the new				
registered agent and/or the new registered office address her	<u>e</u> :					
Name of New Registered Agent:		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
New Registered Office Address:						
	Enter Florida street address					
	, Florida	Zip Code				
	City	ZID Coae				

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			☐ Change
			☐ Remove
			Add
			Remove
			Change
			SSE Add
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			☐ Change
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