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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

то:		stration Sec sion of Corp		to the second se	
CUDIE		Croce Cons	struction, LLC	,	
SUBJEC	CI: _		Name of Lim	ited Liability Company	
The encl	losed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn :	all correspor	ndence concerning this matter	to the following:	
			Steve Croce		Daytime Telephone Number \$60.00 Filing Fee, Certificate of Status &
				Name of Person	- · - 100 ± - 100
			Croce Construction, LLC		
		Firm/Company			
			2280 4th Place		
			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	Address	· — ·
			Vero Beach, FL 32962		
				City/State and Zip Code	
			scroceconllc@hotmail.com		
				to be used for future annual report not	ification)
For furth	ner inf	formation co	ncerning this matter, please ca	all:	
Steve C	Croce			856 924-0443	
		Name of	Person	Area Code Daytim	e Telephone Number
Enclosed	d is a	check for the	e following amount:		
\$25.0	00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

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

Croce 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 06/17/2016 and assigned Florida document number 81-297-3823 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 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 Florida

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	James Logan	1025 26th Ave, Vero Beach, FL	■ Add
			□ Remove
	·		
MGR	Brian Markey	2260 47th Terrace, Vero Beach,	Add
			Remove
		-	☐ Change
			Add
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
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Effec	tive date, if other than the date of filing: (optional)		
Note	ffective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	o 605.02 e listed	207 (3) as the
docu	nent's effective date on the Department of State's records.		
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e e 90th day after the record is filed.	arlier	of:
Dated	1		
	/ ************************************		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00