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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ABK CONSTRUCTION GROUP 2LC  Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
BEN ABERNATHY  Name of Person
ABK CONSTRUCTION GROUP LLC Firm/Company
2731 NE 48 ST. Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (305) 986 6767  Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\square\$ \$55 Filing Fee & Certified Copy
INHS18 (2/14)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ABK CONSTIDUCTA (Name of the Limited Liability Con (A Florida Limite	ON GROUP	LLC						
(A Florida Limited	ed Liability Company)	s on our recort	<u>18.</u> )					
The Articles of Organization for this Limited Liability Compa Florida document number <u>L/6600128160</u> .	ny were filed on	JULY 6	2016	_ and a	ssigned			
, ,								
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited li	ability company he	<u>re</u> :						
The new name must be distinguishable and contain the words "Limited Lis	ability Company," the d	esignation "LLC	C" or the abbrev	viation "	L.L.C."			
Enter new principal offices address, if applicable:								
(Principal office address MUST BE A STREET ADDRESS)		· • · · · · · · · · · · · · · · · · · ·		17	ž co			
,	<u> </u>			FEB	<u> </u>			
•				27				
Enter new mailing address, if applicable:				72	<u> </u>			
(Mailing address MAY BE A POST OFFICE BOX)				<u>22</u>	<u> </u>			
	<del></del>			Ę.	কুল - কুল			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		our record	s, <u>enter the</u>	e nam	e of the ne			
Name of New Registered Agent:								
New Registered Office Address:	n . m	ida street addres						
	Enter Flor	aa street aadres	22					
<del></del>	City	, Fl	orida	Zip Cod	<u> </u>			
New Registered Agent's Signature, if changing Registered Ager	Ž		•	Lip Cou	<b>5</b>			

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	RONI AVRAHAM	19500 TURNBERRY WAY	<b>D</b> Add
		SUITE 25 AB	Remove
		AVENTURA FL 33180	Change
MGR	HEATHER ABERNATHY	2731 NE 48 ST	Add
		LIGHTHOUSE POINT FG 3306	Remove
			Change
	<del>-</del>		Add
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