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COVER LETTER

	ivision of Co		•			
SUBJECT	2-B OUTD	2-B OUTDOOR CONSTRUCTION COMPANY, LLC Name of Limited Liability Company				
SUBJECT	•					
The enclose	ed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please retur	n all correspo	ondence concerning this matter	r to the following:			
	MATTHEW L. BELL. CPA					
	Na HARDING BELL INTERNATION		Name of Person			
	Firm/Company			 		
		113 PONTOTOC PLAZA	Address			
	AUBURNDALE, FL 33823					
		MATT.BELL@HBITAX.(
For further i	information c	E-mail address: oncerning this matter, please o	(to be used for future annual report not all:	ification)		
MATTHEW	V L. BELL, C		863 968-1010 at ()			arī.
	Name o	f Person	Area Code Dayting	e Telephone Numbe r	<u>;</u>	
Enclosed is	a check for th	e following amount:			 %	97.2
■ \$25.00 F	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)	PK12: 30	Y OF STATE CORPORATIONS
	Registra Division P.O. Bo	and ADDRESS: ation Section in of Corporations ix 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on ations onter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2-B OUTDOOR CONSTRUCTION CO	JMPANY, LLC Jability Company as it now appears on or forida Limited Liability Company)	ur records.)	_
The Articles of Organization for this Limited Liabil Florida document number L16000181992			nd assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
The new name must be distinguishable and comain the words	"Limited Liability Company," the designa	tion "LLC" or the abbreviati	on "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	IDDRESS)		- 13
Enter new mailing address, if applicable:	_ 		0 C3
(Mailing address MAY BE A POST OFFICE BO.	<u> </u>		PH 12 30
			12 RATE
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our address here:	records, enter the p	ame of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida sti	reet address	
<u>-</u>		, Florida	Code
	City	Z.p	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
AMBR	SANTANA, ANDRE LUIS	9025 ARBORS EDGE TRL	
			D Add
		WINDERMERE, FL 34786	
		<u> </u>	≅ Remove
	:		Change
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Effective date, if other than the of if an effective date is listed, the date must Note: If the date inserted in this blood document's effective date on the Dej	be specific and cannot be prior ick does not meet the applica	to date of filing or more than	(optional) 90 days after filing.) Pursuant to ements, this date will not be	605.020 listed a
ne record specifies a delayed The 90th day after the reco		an effective time, a	it 12:01 a.m. on the ea	adier o
Dated MAY 30	2019			
Zauxi				
		, ,		
	ignature of a member or autho		<u> </u>	_

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Filing Fee: \$25.00