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SECRETARY OF STATE OF BIVISION OF CORP. RATIOH

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COVER LETTER

Division of Cor			
MFC CO SUBJECT:	NSTRUCTION GROUP, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CESAR OSTOS		
		Name of Person	
		Firm Company	
	2751 S CHICKASAW 1	RAIL SUITE 106	
		Address	
	ORLANDO FL 32829		
	augustoss13@hotmail.	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please c	all:	
CESAR OSTOS		305 515-0475	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAII	INC ADDRESS.	STDEET/CAUDIL	ed annuec.

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

MFC CONSTRUCTION GROUP, LI	LC		
(Name of the Limited 1	Liability Compa Florida Limited I	ny as it now appears on our records.) liability Company)	
he Articles of Organization for this Limited Liabi	ility Company	were filed on09/30/2016	and assigned
orida document numberL16000183035	·		
his amendment is submitted to amend the followi	ng:		
. If amending name, enter the new name of th	e limited liab	ility company here:	
N/A			
ne new name must be distinguishable and contain the word	s "Limited Liabil	ity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	3 Year
Principal office address MUST BE A STREET ADDRESS)			
			~ ∂2=
			70 7.90 34 .
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	ري هې
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		 .	
. If amending the registered agent and/or	registered of	fice address on our records,	enter the name of the
gistered agent and/or the new registered office	e address her	<u>e</u> :	
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street address	
		. Flori	ida
-		City	Zip Code

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	MARESA LAMOURT	1111 BRICKELL BAY DR #3203	
		MIAMI FL 33131	■ Remove
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fective date, if other than (he date of filing:	(optional)	
		filing or more than 90 days after filing.) Pursuant to 605 atory filing requirements, this date will not be listed	
	Department of State's records.	nory ming requirements, this date will not be use	Çu a
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		factive time at 12.01 and a the small	
The 90th day after the r		fective time, at 12:01 a.m. on the earlie	er ¢
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, JUNE 21TH	2018		
ated	·		
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- \	Copy Offer		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

	06/21/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	212.122.12	
0) 	5/21/2018	
meetive date <u>it applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, to Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	ment(s)
	pproved by the shareholders through voting groups. The following store each voting group entitled to vote separately on the amendment(s)	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and share dopted by the incorporators without shareholder action and sharehold	
·		
06/21/ Dated	2018	
Signature	Cesar Ottos.	
(By a selec	director, president or other officer – if directors or officers have not ted, by an incorporator – if in the hands of a receiver, trustee, or othe inted fiduciary by that fiduciary)	
	CESAR OSTOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	