

L16000 183 035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

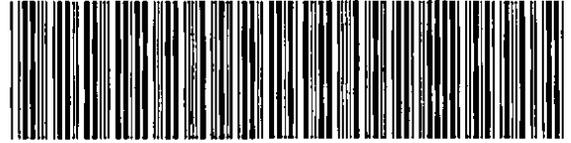
(Business Entity Name)

(Document Number)

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08/12/19--01012--016 **25.00

2019 AUG 12 PM 4:46

R. WHITE

AUG 14 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MFC CONSTRUCTION GROUP, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIET OSTOS

Name of Person

SUCCESS BUSINESS SOLUTIONS

Firm/Company

2751 S. CHICKASAW TRAIL, SUITE 106

Address

ORLANDO, FLORIDA 32829

City/State and Zip Code

PAYROLL@MARIETOSTOS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIET OSTOS

407 745-4684

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 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 F I L E D
OF**

2019 AUG 12 PM 4:46

MFC CONSTRUCTION GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) ALL

The Articles of Organization for this Limited Liability Company were filed on 09/30/2016 and assigned Florida document number 116000183035.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

n/a
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

n/a

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

n/a

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:

n/a

New Registered Office Address:

n/a

Enter Florida street address

_____, Florida _____
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.

n/a
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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|--------------|------------------------|---|
| MGR | MARIN, MARIA | 2751 S CHICKASAW TRAIL | <input checked="" type="checkbox"/> Add |
| | | SUITE 106 | <input type="checkbox"/> Remove |
| | | ORLANDO, FLORIDA 32829 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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