

L16000224272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

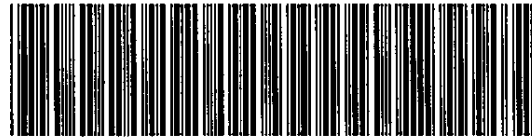
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 18 2017

S. YOUNG

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 JAN 17 AM 8:09

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Agape Construction Services, 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:

Jesus J. Del Rio

Name of Person

Agape Construction Services, LLC

Firm/Company

P.O. BOX 151202

Address

CAPE CORAL, FLORIDA 33915-1202

City/State and Zip Code

AGAPECONSTRUCTION@PROTONMAIL.COM

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

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TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

JESUS J DEL RIO

239 810-5787

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
OF**

AGAPE CONSTRUCTION SERVICES, 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 DECEMBER 12, 2016 and assigned
Florida document number L 16000224272.

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 "L.L.C."

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 _____
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>	<u>Address</u>	<u>Type of Action</u>
MGR	BRIAN C. DEL RIO	624 NW 1ST TERRACE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33993	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

JESUS J DEL RIO


Typed or printed name of signer

Resignation from Agape Construction Services, LLC

I Brian C. Del Rio, resign as a manager of Agape Construction Services, LLC, effective January 11th, 2017.

Moreover, I renounce any and all interest in stocks, money, or any tangible propertie (s) , that may come from Agape Constructions Services, LLC.

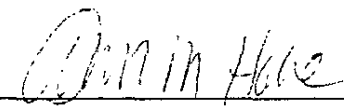
I will have this document notarized before, a state of Florida notary, to attest to my desire to resign, as a manager, of Agape Construction Services, LLC, and renounce my interest, as aforementioned.

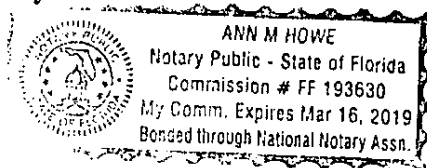
Brian C. Del Rio: 

Florida Drivers License: D 466063842020

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Signed on 11 January, 2017, before state of Florida Notary.


Notary



CC: Board of Agape Construction Services, LLC