# L17000015879

Requestor's Name)
(Address)
(Address)
City/State/Zip/Phone #)
WAIT MAIL
Business Entity Name)
Document Number)
Certificates of Status
to Filing Officer:

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2017

JOSE N DIAZ 2508 NW 23RD STREET LOT 164 BOYNTON BEACH, FL 33436

SUBJECT: ELOAH CONSTRUCTION LLC

Ref. Number: L17000015879



We have received your document for ELOAH CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 817A00005615

# **COVER LETTER**

Division of Corporations
SUBJECT: ELOAh Construction LC  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:
Please return all correspondence concerning this matter to the following:
Ehoah Construction Kic Firm/Company
2508 NW 23rd St. Lot 164
Boynton Beach FL 33436 City/State and Zip Code
H-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person  at (561) 232-1021  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Solon Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy (additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)

TO:

**Registration Section** 

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

1 ..

e Loah Lonstra	ction LLC						
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our Limited Liability Company)	<u>r records.</u> )					
The Articles of Organization for this Limited Liability Co	ompany were filed on	and assigned					
This amendment is submitted to amend the following:							
. If amending name, enter the new name of the limited liability company here:							
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	<u> </u>					
(Principal office address MUST BE A STREET ADDRI	ESS)						
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)							
	·····						
B. If amending the registered agent and/or registered agent and/or the new registered office address.		records, enter the name of the new					
Name of New Registered Agent:		,					
•							
New Registered Office Address:	Enter Florida stree	et 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 **Title Type of Action Address** AMBR Gloria Ehros Dioz 2508 DW 23 NSt Lit/64 XAdd ☐ Change ☐ Add □ Remove ☐ Change ☐ Add ☐ Remove ☐ Change .<u>\_</u>□ Remove Change □ Remove \_□ Change □ Add

☐ Remove

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	(optional)	cannot be prior to date of fi	date, if other than the date of filing ye date is listed, the date must be specific and	tive date, if

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Filing Fee: \$25.00