## L17000021950

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SECRETARY OF STALLAHASSET ...

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## **COVER LETTER**

TO:	Registration Se Division of Cor		·	*
SUBJEC	NATIONW	IDE GENERAL CONTRACT	ING, LLC	•
SOBIL	J1	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
	·	AARON THALWITZER,		
			Name of Person	·
		GORDON & THALWITZ	ER	
			Firm/Company	
		299 N. ORŁANDO AVE		7:22
			Address	
		COCOA BEACH, FL 329	31	2
		A A DOMO DO TWA DEN EC	City/State and Zip Code	2072 DEC 21 Fix 2: 10 TALE ARMS SEE
		AARON@BREVARDLEG	to be used for future annual report notifications	ation)
For furth	ner information ce	oncerning this matter, please c	all:	
KAELY	N BARBOUR		321 799-4777	
	Name of	f Person	at ()	elephone Number
Enclosed	d is a check for th	e 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 S		Street Address: Registration Secti	on

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NATIONWIDE GENERAL CONTRACTING, LLC

( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our lability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number L17000021950	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabit	lity Company," the designation	"LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		202
Enter new mailing address, if applicable:		DEC 21 1
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:		
	Enter Florida street	address
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	,	·
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is

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	Lype of Action
AMBR	NATIONWIDE CONSTRUCTION	NATIONWIDE CONSTRUCTION VENTURES, LL	C _ ≣Add
		608 HOFFNER AVENUE	_ □Remove
		ORLANDO, FL 32809	_ □Change
			_ 🗆 Adđ
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			_ []Change
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ctive date, if other than the date	of filing: NOVEMBER		(optional)	
effective date is listed, the date must be sp e: If the date inserted in this block do	oes not meet the applicab	date of filing or more than le statutory filing requir	90 days after filing.) Pursua ements, this date will no	nt to 605.020 t be listed a
iment's effective date on the Departn	nent of State's records.			
ord specifies a delayed effective date	, but not an effective time	e, at 12:01 a.m. on the e	arlier of: (b) The 90th (	day after th
filed.				
DECEMBER ,	2022			
<u></u>	<u></u>	.•		
	/ 1			

Filing Fee: \$25.00