L17000044462

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10/29/24--01014--015 **55.00



COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	Bliss Constr	ruction Group, LLC		
SUBJECT:		Name of Limi	ited Liability Company	
The enclosed	d Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Michael H. Williams Sr.		
			Name of Person	
		Bliss Construction Group.	LLC	
			Firm Company	
		112 Lansing Island Dr.		
			Address	
		Indian Harbor Beach, FL. 3	32937	
			City/State and Zip Code	
		mhwgator@gmail.com	to be used for future annual report not	ification)
For further is	nformation co	oncerning this matter, please ca	•	
Michael H.	Williams, Sr.		321 432-2222 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is a	a check for th	e following amount:		
□ \$25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed

Registration Section

TO:

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

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

Bliss Construction Group, LLC	5. 41 - 105. C	
(<u>Name of the Lim</u>	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
he Articles of Organization for this Limited I	Liability Company were filed on $\frac{02/2}{1}$	4/2017 and assigned
lorida document number L17000044462		
his amendment is submitted to amend the fol	lowing:	
a. If amending name, enter the new name of	of the limited liability company her	<u>e</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if appli	icable:	24
Principal office address MUST BE A STRE.		: B
		18 PN -
nter new mailing address, if applicable:		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
Mailing address MAY BE A POST OFFICE	<u></u>	
		2+ ·
s. If amending the registered agent and/or gent and/or the new registered office addro		cords, <u>enter the name of the new regi</u>
Name of New Registered Agent:		
New Registered Office Address:	112 Lansing Island Dr	
	Enter Floria	la street address
	Indian Harbor Beach, FL	Florida <u>32937</u>
	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 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
AMBR	Michael H. Williams, Jr	2287 W. Eau Gallie Blvd., Melbourne, FL 32935	□Add
			Remove
AMBR	Randall Trent	2287 W. Eau Gallie Blvd, Melbouren, FL 32935	
			Remove
			□Change
			□Add
			□Remove
			□Change
			□ Ad d
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			□Change

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an eff ote:	ve date, if other than the date of filing:
record l is fil	d 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 ed.
	October 23 2024
ated :	
ated _.	Allehal A Ville Sr. Algren

Filing Fee: \$25.00