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COVER LETTER

TO:

Registration Section

Division of Co	rporations		
ASJ CON SUBJECT:	STRUCTION, LLC		
	Name of Lin	ited Liability Company	
•			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	ANTHONY JARAMILLO		
		Name of Person	
	JERRY JARAMILLO & A	ASSOCIATES	
		Firm/Company	
	2100 W DR MARTIN LU	ITHER KING JR BLVD	
		Address	
	TAMPA, FL 33607		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	JARAMILLOA12@GMAI		7
Pau Grath in Indianasian		to be used for future annual report noti	neation)
	concerning this matter, please c		
ANTHONY JARAMILI		813 690-6725 at ()	
Name (of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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)
Regist Divisi P.O. F	JNG ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpo Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

18 AUG 16 AM 9:30
TALLAMASSIE, FLORIDA

ASJ CONSTRUCTION, 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 05/02/2017	and assigned			
Florida document number L17000097790					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
Grupo Aventura MX, L.L.C.					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	2100 W Dr Martin Luther King	Jr Blvd			
(Principal office address MUST BE A STREET ADDRESS)	DRESS) Tampa, FL 33607				
Enter new mailing address, if applicable:	2100 W Dr Martin Luther King	Jr Blvd			
(Mailing address MAY BE A POST OFFICE BOX)	POST OFFICE BOX) Tampa, FL 33607				
Name of New Registered Agent:					
New Registered Office Address:	Enter Florida street address				
	City	ida Zip Code			
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>				
I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is			

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 =		Type of Action Address Address				
<u>Title</u>	<u>Name</u>	Address TALLAHASSEE, FLORIE Type of Action				
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