## L17000115972

	•	
(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
·		
MJUN-5 PM 4: 92		
ZBH JUN	Office Use Onl	у



000299833190

06/06/17--01005--028 \*\*25.00

CRUTARY OF STATE

S. WARREN JUN 0 6 2017

## **COVER LETTER**

TO:	Registration Se Division of Cor			*	
OLID I	, , , , , , , , , , , , , , , , , , ,	ORENGO'S C	ONSTRUCTION, LLC	•	
SUBJ	EC1:	Name of Limi	ited Liability Company	<u>,                                      </u>	
The er	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		MAF	RTIN JR. ORENGO TORI	RES	
			Name of Person		
		ORENG	GO'S CONSTRUCTION,	LLC	
		<del></del>	Firm/Company	:	
		156	630 AUTUMN GLEN AV	/ENUE	
		···	· Address		
			CLERMONT, FL 3471	14	
			City/State and Zip Code		
			nartinjrorengo12@gmail.c		
		E-mail address: (t	to be used for future annual r	report notification)	
For fu	rther information c	oncerning this matter, please ca	all:		
Martin Jr. Orengo Torres			407 at ()	515-0637	
	Name o	f Person	Area Code	Daytime Telephone Number	
Enclos	sed is a check for th	ne following amount:	,		
<b>₽</b> \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclasse)	Certificate of Stat	

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

	ENGO'S CONSTRUCTION, LLC		
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)	
he Articles of Organization for this Limited I orida document numberL17000115972	· · · · —	5/25/2017	and assigned
is amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name of	of the limited liability company he	e <u>re</u> :	
			Z8 . <b>3</b>
ne new name must be distinguishable and contain the	words "Limited Liability Company," the d	esignation "LLC" or the a	bbreviatio L.L.C."
nter new principal offices address, if appli	cable:		FILE SECTION
rincipal office address MUST BE A STRE	ET ADDRESS)		<u> </u>
	. , , , , , , , , , , , , , , , , , , ,		To T
			FATE ORIDA
nter new mailing address, if applicable:	·		<u> </u>
<u> Iailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>		
If amending the registered agent and gistered agent and/or the new registered o		our records, enter	the name of the
Name of New Registered Agent:	MARTIN JR. ORENGO TORRES	S	
New Registered Office Address:	15630 AUTUMN GLEN AVENU	JE	
	Enter Flor	ida street address	
	CLERMONT	, Florida	34714
	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.

Mcutin A. Olengo Jorres

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 = Ms $AMBR = As$	anager uthorized Member	·	•
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			☐ Change
	· · · · · · · · · · · · · · · · · · ·		□ Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			□ Change
<del></del>			
			☐ Remove
			□ Change
			Add
			Parava
			AHA D Change
	-		SEE
			SRE AST OF STATE Remove
	·		∴ Change

-							
	· · · · · · · · · · · · · · · · · · ·						
·							
		<del></del>					
							_
<u> </u>							_
					•		_
	<del></del>						_
					<u> </u>	<del></del>	
					<del></del>		
fective date, if other tha	n the date of filir	ng:	late of filing or more t	han 90 days after	ional)	Durenant to	605 OC
affactive date is listed the de	this block does not	meet the applicable	e statutory filing re	quirements, th	is date w	rill not be	listed
n effective date is listed, the date: If the date inserted in							
n effective date is listed, the date: If the date inserted in tournent's effective date on	the Department of						
te: If the date inserted in a cument's effective date on	-	State's records.	n effective time	a at 12·01	am o	n the es	rliar
te: If the date inserted in a cument's effective date on record specifies a de	layed effective	State's records.  date, but not a	n effective time	e, at 12:01	a.m. o	n the ea	rlier
te: If the date inserted in a cument's effective date on record specifies a de the 90th day after the	layed effective	State's records.  date, but not a	n effective time	e, at 12:01	a.m. o	n the ea	rlier
te: If the date inserted in the cument's effective date on record specifies a define 90th day after the	layed effective	State's records.  date, but not a	n effective time	e, at 12:01	a.m. o	n the ea	rlier
te: If the date inserted in the cument's effective date on record specifies a define 90th day after the	layed effective	State's records.  date, but not a	n effective time	e, at 12:01	a.m. o	n the ea	rlier
te: If the date inserted in the cument's effective date on record specifies a define 90th day after the	layed effective e record is filed	date, but not a l.  2017			a.m. o	n the ea	rlier
te: If the date inserted in the cument's effective date on record specifies a define 90th day after the fed	layed effective e record is filed	State's records.  date, but not a			a.m. o	n the ea 17 JUN −5	rlier

Page 3 of 3

Filing Fee: \$25.00