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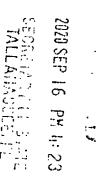
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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(Document Number)				
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COVER LETTER

TO:	Registration Se Division of Cor						
SUBJE	YANIE	L & SON CONSTRUCTION.	LLC.				
SOBJE	L1:						
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please re	eturn all correspo	ndence concerning this matter	to the following:				
		Υ/	ANIEL A ALVAREZ				
Name of Person							
		YANIEL &					
		Firm/Company					
	2700 RANCH HOUSE RD						
	YANIELALVAREZII@YAHOO.COM E-mail address: (to be used for future annual report notification)						
		202 SE					
For furth	ner information co	oncerning this matter, please c	all:		2020 SEI SEURE TALL	1 1 1 1 1 1 1 1 1	
YANII	EL ALVAREZ		561 223-6145		7 16 MIA	و - بر سخ	
	Name of	Person	Area Code Daytim	e Telephone Number	P. P.	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
Enclosed	I is a check for th	e following amount:				4.35	
■ \$25	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional capy is enclosed)	Certified	te of Status &		
	Mailing Address Registration S		Street Address: Registration Se	ction			

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

YANIEL & SON CON	STRUCTION, LLC.			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000119122</u>		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:			
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	2700 RANCH HOUSE RD	_		
Principal office address MUST BE A STREET ADDRESS)	WEST PALM BEACH FL. 33406			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	2700 RANCH HOUSE RD WEST PALM BEACH FL. 33406			
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:	address on our records, <u>enter the na</u>	me of the new register		
New Registered Office Address:	Enter Florida street address	PH TI		
	City , Florida	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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			Compe ACC SE
			<u>→ · · · · Add</u>
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			□Add
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<u></u>			□ Add
			□Remove
			Change

Typed or printed name of signee