117000143080

(December Martin)
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S.HARRIE

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	E.T. CONTRACTO	OR. LLC	
		led Liability Company	
The enclosed Articles o	f Amendment and fee(s) are subm	nitted for filing.	
Please return all corresp	oondence concerning this matter t	o the following:	
	EDGAR A.	TORO TORRES	
		Name of Person	
		Firm/Compan	
	108 Milest	IONE DR	
	_	Address	
	HAINES CITY	1, FL 3384A	
		City/State and Zip Code	on COW
	E-mail address: ()	Spcna16@yaha	otification)
For further information	concerning this matter, please ca	ill:	
Flank A	TOIO TOILES	707 716	7(7)
	of Person	at (787), 718	ime Telephone Number
			,
Enclosed is a check for	the 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)
	LING ADDRESS:		RIER ADDRESS:
Divis	stration Section sion of Corporations	Registration Sec Division of Corp	porations
	Box 6327 hassee, FL 32314	Clifton Building 266 Executive	Center Circle
		Tallahassee, FL	32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

E. I. (ON IRACTOR,	LCC
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) by Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L17000143080</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	inpany," the designation "L.E.C." or the abbreviation "L.E.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter-the name of the new
New Registered Office Address:	Enter Florida street address
	!, Florida ity
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfaceept the obligations of my position as registered agent as provide being filed to merely reflect a change in the registered office addrompany has been notified in writing of this change.	rmance of my duties, and I am familiar with and led for in Chapter 605. F.S. Or, if this document is
if Changing I	Registered Agent, Signature of New Registered Agent

	g Authorized Person(s) authorized to me from our records:	inage, <u>enter the title, name, and address of</u>	each person being added
MGR = N $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Edgar A Tord Torres	108 Milestone Dr Haines City, Fl 3384	Z Add
		Haines City, Fl 3384	-Д. □ Remove
			Change
			□ Remove
			☐ Change
			🗆 Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change
			Add Remote
			SSEE D Charles
			□ Remove
			Change

D. If an	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an ef <u>Note:</u>	ctive date, if other than the date of filing:
the re	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Signatule of a member or authorized representative of a member
	Edgar A. Toro Torres 32 7
	Typed or printed name of signee
	Programme 2 of 2

Filing Fee: \$25.00