L17000 144282

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(City/State/Zip/Phone #)					
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SECRETARY DE STATE
SECRETARY DE

COVER LETTER

TO: Registration Se Division of Con						
	UILDERS, LLC					
SUBJECT: Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.				
Please return all correspo	ondence concerning this matter t	to the following:				
	Victor Meza					
Name of Person						
V-Mex Builders, LLC						
		Firm/Company				
	11131 Riggs Road					
		Address				
	Naples, FL 34114					
City/State and Zip Code						
	Commexpainting@hotmail.	com to be used for future annual report notific				
For further information of	concerning this matter, please ca	•	ation)			
Victor Meza		239 269-4469 at ()				
Name of Person Area Code Daytime 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 radditional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

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, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V-Mex Builders, LLC

(Name of the Limited Liability (A Florida I	Company as it now appears on	our records.	
The Articles of Organization for this Limited Liability Co.	mpany were filed on 07-05-2	:017	and assigned
Florida document number L17000144282			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company." the design	ation "LLC" or the abbrev	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u> </u>		

Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida si	reet address	
		, Florida	
	City	, rsorida	Sip Coix
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent at provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my c ent as provided for in Chap	duties, and I am fami ter 605, F.S. Or, if th	liar with and as document is
	If Changing Registered Agent,	Signature of New Registe	Ted Age
	Page 1 of 3		PH FLC

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> Fitle</u>	<u>Name</u>	Address	Type of Action
Owner	Victor Meza	11131 Riggs Road, Naples, FL 341	■ Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			□ Add
		WHAT	Remove
			☐ Change
**************************************			Add
			□ Remove
			☐ Change
			□ Add
			CI Remove
			□ Change
			□ Add
			□ Remove
			☐ Change

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Filing Fee: \$25.00