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(Re	equestor's Name)	
(Ad	dress)	
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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJI		onstruction LLC		
		Name of Limited Liability Company	_	
The en	closed Articles of	Amendment and fee(s) are submitted for filing.		
Please	return all correspo	ondence concerning this matter to the following:		
		Jorge Monch		
		Name of Person	_	
		Projecta Construction LLC		
		Firm/Company		
		11098 Biscayne Blvd. Suite 401-29		
		Address		
		Miami FL 33161		
		City/State and Zip Code jorgemonch@hotmail.com	791	62 - 1 WAL
		E-mail address: (to be used for future annual report notification)	· 雪	امد . بير طبعد ون
For fur	ther information co	concerning this matter, please call:	٥	1 8
Andre	s Pompei	786 9251206 at ()	A	じ
	Name of	of Person Area Code Daytime Telephone Num	iber on	
Enclos	ed is a check for the	he following amount:		
\$ 2	5.00 Filing Fee	Certificate of Status Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & fied Copy onal copy is enclose	

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



Projecta Construction LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	ppears on our records.) pany)
he Articles of Organization for this Limited Liability Company were filed o	on 08/23/2017 and assigned
orida document number L17000180715	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability compar	ny here:
he new name must be distinguishable and contain the words "Limited Liability Company,"	"the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable:	: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Mailing address MAY BE A POST OFFICE BOX)	
	P
. If amending the registered agent and/or registered office addres	ss on our records, enter the name of the
egistered agent and/or the new registered office address here:	5 · =
Name of New Registered Agent:	25
New Registered Office Address:	
New Registered Office Address: Ente	ter Florida street address
	ter Florida street address Florida

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 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Actio
MGR	Jorge L. Monch V.	11098 Biscayne Blvd. Suite 401-29	= Add
		Miami FL 33161	Remove
			Change
			Add
			Remove
			☐ Change
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ve date, if other than the date of filing: ctive date is listed, the date must be specific and cannot be prior to date of filing or mon if the date inserted in this block does not meet the applicable statutory filing is ent's effective date on the Department of State's records.	(optional) re than 90 days after filing.) Pursuant to 605.
ecord specifies a delayed effective date, but not an effective tine e 90th day after the record is filed.	me, at 12:01 a.m. on the earlie
, April 4th 2018	
April 4th , 2018 Signature of a member of authorized representative of	fa member

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Filing Fee: \$25.00