L17000194810

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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	ordon Groc	up Contractor ited Liability Company	3, LLC	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Scot	+ Michael E	bordon	
	Gordon G	Firm/Company	ctors, L	LC
	4340 NW	120 Avenue	_	
	coral Sp	OY INGS FE 33	065	
	SCOTT 90 rcbr	to be used for luture annual report notific	OS, COM	2020 SEP SECRETALLA
For further information co	oncerning this matter, please ca	ill:		P 21
SCOH Goy Name o	f Person	at (347) 782 - Area Code Daytime	5278 Telephone Number	# 6: 2¢
Enclosed is a check for th	ne following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
Mailing Addres Registration S Division of C	Section	Street Address: Registration Sec Division of Corp		
P.O. Box 632		The Centre of Ta		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gordon Group	Contractors, LLC	
(A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 1700019481</u> 0	y were filed on $9.19.2017$ and assign	gned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial COYGON CONSTYLLCTION The new name must be distinguishable and contain the words "Limited Liab	& Development, LLC	C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	STORING SEP	3 3 1 er - 1
Enter new mailing address, if applicable:	2	· · ·
(Mailing address MAY BE A POST OFFICE BOX)		
		,
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new	registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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.

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
AMBR	Leo Gordon, Jr.	6050 NW Col Manor	□Add
		Parkland, F. 33067	Nemove
			□Change
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ective date, if other than the date of filing: September 17,2020 in effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9 te: If the date inserted in this block does not meet the applicable statutory filing require cument's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursicements, this date will r	uant to 605.0207 not be listed as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the easis filed.	arlier of: (b) The 90ti	i day after the
sed September 17th . 2020.		