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PICK-UP WAIT MAIL
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K. SALY MAY 24 2018

COVER LETTER

_	ision of Cor		;	•
SUBJECT:	MIRANDA	CONSTRUCTION & DEVE	LOPMENT	
SOBOLOT,	_	Name of Lin	nited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		OLGA MIRANDA		
			Name of Person	
			Firm/Company	
		2900 NW 130 AVENUE #	4402	
			Address	
		SUNRISE, FLORIDA 333	323	
			City/State and Zip Code	
		CONTACTOLGAMIRANI	-	
		E-mail address: (to be used for future annual report notif	ication)
For further in	formation co	ncerning this matter, please ca	all:	
OLGA MIRA	ANDA		305 965-6055	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 Fi	iling 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)

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

FILED

18 MAY 22 PM 2: 12

MIRANDA CONSTRUCTION & DEVELOPMENT

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

		177.
The Articles of Organization for this Limited Liability Company	were filed on 10/16/2017	and assigned
Florida document number L17000213195		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ulity company here:	
ProCom Comercial Painting LLC.		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2900 NW	130 AUZ
(Principal office address MUST BE A STREET ADDRESS)	#402	
	Sunase 1	FT 33323
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	SKM	12 m
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, ee:	nter the name of the
Name of New Registered Agent:	Some.	
New Registered Office Address:		
	Enter Florida street address	
	, Floric	la
	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 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:

AMBR =	Authorized Member	FILE	ΞD
<u>Title</u>	<u>Name</u>	Address Address	PH 2: 12 Type of Action
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Signature of a number or authorized representative of a member		
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Page 3 of 3

Filing Fee: \$25.00



May 14, 2018

OLGA MIRANDA 2900 NW 130 AVE. #402 SUNRISE, FL 33323

SUBJECT: MIRANDA CONSTRUCTION & DEVELOPMENT LLC

Ref. Number: L17000213195

We have received your document for MIRANDA CONSTRUCTION & DEVELOPMENT LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is incomplete. Enclosed is the missing page (signature page) for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 918A00009962

OD

Signed & attacked