118000016684

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SECRETARY OF STATE

COVER LETTER

	Registration Se Division of Corp				të.			
CUBIEC		& CONSTRUCTION LLC			1			
SUBJEC	.1:	Name of Lim	nited Liability Compa	ny				
The enclo	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.					
Please re	turn all correspo	ndence concerning this matter	to the following:					
		MANUEL ARMAS						
			Name of Pers	on				
		WELDING & CONSTRU	CTION LLC					
			Firm/Compar	ıy				
		3310 NW 171 TER						
MIAMI GARDENS FL 33056								
			City/State and Zip	Code				
		MANUELARMAS2@GM						
For furth	er information co	e-mail address: (to be used for future a	annuai report notti	ication)			
MANUE	L ARMAS		786 at (444-6638				
	Name of	Person	Area Cod	e Daytime	e Telephone Number			
Enclosed	is a check for th	e following amount:						
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Certified Co (additional cop	ру	□ \$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			Rej Div Cli 260	REET/COURI gistration Section vision of Corpora fton Building 51 Executive Ce llahassee, FL 32.	ations nter Circle			

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

WELDING & CONSTRUCTION LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{01/18/2018}{1}$ and assigned Florida document number ____ L18000016684 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 Company," the designation "LLC" or the abbreviation "L.L.C." 3310 NW 171 TER MIAMI GARDENS FL 33056 Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 3310 NW 171 TER MIAMI GARDENS FL 33056 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office adddess on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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

MGR = N	Manager		
Title	Authorized Member <u>Name</u>	<u>Address</u>	Type of Action
			□ Remove
			☐ Change
			☐ Remove
			
			☐ Remove
			□ Add
			□ Remove
			□ Remove
			□ Change
·			
			☐ Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	PP	'유c '사
	N 2	TATE
(If an ef Note:	tive date, if other than the date of filing: [Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.	3)(b) he
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.	
Dated	Signature of a member or authorized representative of a member	
	MAHVY Arma Sancher Typed or printed name of signee	

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Filing Fee: \$25.00