

Office Use Only



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COVER LETTER

ALIN IP CVP	Complex Bu	ilding Construction LLC		
SUBJECT:		Name of Limit	ed Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspond	dence concerning this matter to	o the following:	
		Jelani G. Miller		
			Name of Person	·
		Complex Building Constru	uction LLC	
			Firm/Company	
		535 NE 107th St.		
		•	Address	
		Miami, fl. 33161		
			City/State and Zip Code	
		complexconstruction1@gr		<u> </u>
		E-mail address: (to	be used for future annual repor	t notification)
For further in	nformation cor	ncerning this matter, please cal	l:	
Jelani Mille			954 805-29 at ()	
	Name of I	Person	Area Code D	aytime Telephone Number
Enclosed is a	a check for the	following amount:		
\$25.00 F	filing 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:

· TO:

Registration Section
Division of Corporations

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

Complex Building Co				
(Name of the Limited Liability Company (A Florida Limited Liab	bility Company)	on our records.)		
The Articles of Organization for this Limited Liability Company we	ere filed on	02/07/2018	and assi	gned
Florida document numberL18000034396				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabilit	y company her	<u>re</u> :		
N/A				
The new name must be distinguishable and contain the words "Limited Liability	Company," the de-	signation "LLC" or the ab	breviation "L.I	~ēī
Enter new principal offices address, if applicable:		N/A		715! <u>(</u> 82.0%
Principal office address MUST BE A STREET ADDRESS)				<u> 55</u>
_	· · · · · · · · · · · · · · · · · · ·		~	- 일본 - 글로
			75	- 설명의 - 기.
Enter new mailing address, if applicable:			1.0	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)			0	27
-			·	
B. If amending the registered agent and/or registered offic	ce address on	our records, enter	the name o	of the n
registered agent and/or the new registered office address here:				
Name of New Registered Agent:		N/A		
Now Panistored Office Address				
New Registered Office Address:	Enter Florie	da street address	<u> </u>	
		, 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 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 Action
MGR	Jelani G Miller	535 NE 107th st. Miami, fl. 3316	= Add
			Remove
			□ Change
-			Add
			□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			□ Remove
			Change
			Remove
			Change
			Remove
			Change

done. If that information out to aposted do won't note gro	atly appreciate it. The ein is #82-4352673.
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	(optional) filing or more than 90 days after filing.) Pursuant to
cord specifies a delayed effective date, but not an e 90th day after the record is filed.	ffective time, at 12:01 a.m. on the earl
June 25 2018	

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Filing Fee: \$25.00