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SECRETARY OF STATE FALLAHASSEE, FLORIDA

COVER LETTER

	Registration Sec Division of Corp				•			
cud ica		ONSTRUCTION LLC						
SUBJEC	. (:	Name of Lim	ited Liability Company					
The enclo	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please re	turn all correspor	ndence concerning this matter	to the following:					
			JUAN CARLOS PER	REZ				
			Name of Person		 _			
		C PE	EREZ CONSTRUCTIO	ONLLC				
		-	Firm/Company	 	. <u></u>			
			10020 SW 33 STRE	EET				
			Address					
			MIAMI, FL 33165					
			City/State and Zip Co	de				
	٠.		GUMAX@BELLSO					
		E-mail address: (to be used for future ann	ua report notificatio	n)			
For furth	er information co	oncerning this matter, please ca	all:					
JUAN C	ARLOS PEREZ		786 at ()	232-8961				
	Name of	Person	Area Code	Daytime Tele	phone 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 Fe Certified Copy (additional copy is		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
		NG ADDRESS:		ET/COURIER A	ADDRESS:			
		ation Section n of Corporations			ration Section on of Corporations			
	P.O. Bo	ox 6327	Clifto	ı B q ilding				
	Tallaha	ssee, FL 32314		Executive Center (nassee, FL 32301	ritcie			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C PEREZ CON	STRUCTION LLC	
(Name of the Limited Liability Compa (A Florida Limited I	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 02/08/2018 and assig	ned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.	
Enter new principal offices address, if applicable:		-
(Principal office address MUST BE A STREET ADDRESS)	©	LC2
	HAR.	= m = m
		SSE
Enter new mailing address, if applicable:	P	<u>, mg</u>
(Mailing address MAY BE A POST OFFICE BOX)		- 0 - 0 - 0 - 0 - 0
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:		the nev
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	
	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with provided for in Chapter 605, F.S. Or, if this docum	and ent is

Page 1 of 3

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 **Type of Action** <u>Address</u> <u>Title</u> Name IDALIA N. DULANTO 812 SE 18th. COURT MGR **■** Add FORT LAUDERDALE, FL 33316 ☐ Remove _□ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add _□ Remove _□ Change _ Add _□ Remove ☐ Change

D. If aniending any other information, enter change(s) h		additional sheets	, if necessary.)		
IDALIA N. DULANTO OWNS 50% OF THE ORGA	ANIZATION				
		_ <u></u>			
					
				-	
					
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			_ _	MAR	LAH LAH
					TAR ASS
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				ب.	유동
				င်္	SH.
					
<u></u>					
					
					
				<u>-</u>	
MARG					
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be p	H 3rd. 2018	ing or more than 90 d	_ (optional) lays after filing.) Pursi	uant to 605.02	207 (3)(b)
Note: If the date inserted in this block does not meet the application document's effective date on the Department of State's reco	plicable statuto	ry filing requireme	ents, this date will n	ot be listed	as the
If the record specifies a delayed effective date, but (b) The 90th day after the record is filed.	not an effe	tive time, at 1	2:01 a.m. on th	ne earlier	of:
Dated MARCH 3rd.					
Signature of a member or a	authorized repres	entative of a member	r		
CARLOS	OSE PEREZ				
Typed or p	printed name of si	gnee			

Page 3 of 3

Filing Fee: \$25.00