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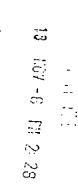
<u> </u>
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

FO:	Registration Sec Division of Corp						
		CONSTRUCTION, LLC					
SUBJE	u:	Name of Limited Liability Company					
The enc	losed Articles of a	Amendment and fee(s) are subt	mitted for filing.				
Please re	eturn all correspor	ndence concerning this matter	to the following:				
		CARDOSA, DANILO					
		CARDOSA CONSTRUCT	Name of Person TION, LLC				
		10208 WEXFORD COUR'	Firm/Company T	<u> </u>			
		TAMPA. FLORIDA 33615	Address				
			City/State and Zip Code				
		E-mail address: (t	to be used for future annual report notif	ication)			
For furtl	her information co	oncerning this matter, please ca	all:				
DANIL	O CARDOSA		at () 5988027 Area Code Daytime	·			
	Name of	Person	Area Code Daytimo	2 Telephone Number			
Enclose	d is a check for th	e following amount:					
\$ 25	.00 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 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

CARDOSA CONSTRUCTION, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000042486	were filed on 02/16/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-	
Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:		Ġ.
Mailing address MAY BE A POST OFFICE BOX)		
		űδ
		(S)
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Liner 1 wride street address	
	, Florid	Zin Code
	Circ	fin 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
MBR	ABRAHANTES,MIGUEL	10208 WEXFORD COURT TAMPA, FL 33165	
			☐ Remove
			Change
MBR	CARDOSA. NOEL	10208 WEXFORD COURT TAMPA, FL 33165	≅ Add
			Remove
			Change
			Add
			□ Remove
			Change : 1
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change

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i 1/5/2018 fective date, if other than the date of filing:	(optional)
n effective date is listed, the date must be specific and cannot be prior to date: If the date inserted in this block does not meet the applicable.	te of filing or more than 90 days after filing.) Pursuant to 605,020
cument's effective date on the Department of State's records.	statethy filling requirements, this date with not be fisted a
record specifies a delayed effective date, but not an The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier
nted NOVEMBER 5TH 2018	
Davile Lordosa TCC	
Signature of a member or authorized	representative of a member

Page 3 of 3

Filing Fee: \$25.00