LIE OUCO LES ETT

Office Use Only



500342775795

04/13/20--01011--012 **25.00

2020 / 13 PH 3: 15



COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	United Name of Limi	5 tars Construented Liability Company	oction LLC
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
		Name of Person Tas Construct Firm/Company	
	-6-11	Firm/Company	
	5315 F	Address Z	2 3
	Pinellas	Park FC City/State and Zip Code	33781
	ea glefor E-mail address: (10	ce - CK @ hot o be used for future annual report notif	mail. com
For further information co	oncerning this matter, please ca		·
Chant Name of	Karajian	at (844) 767 Area Code Daytime	-3773 Telephone Number
Enclosed 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: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AR		AMENDMENI	2.	
	_	0	· · · · · · · · · · · · · · · · · · ·	
ART		ORGANIZATION	· · · · · · · · · · · · · · · · · · ·	ì
	C	F	13 A. S.	
			<i>''</i> ' ' '	
United	Stars	Construction	15	
Name of the Limi	(A Florida Limited	Lonstruction uny as it now appears on our reco	<u>rds.</u>)	
The Articles of Organization for this Limited L	iability Company	were filed on 03/16	20/8 and assigned	
Florida document number <u>L18 0000</u>				
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	f the limited liab	ility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applie	rahle:	5315 Pa	-K Lld 43	
•		Di Mas	-K blud, #3 Park, FL, 33781	,
(Principal office address MUST BE A STREE	ET ADDRESS)	- 1-1195 1195	/ark, / 4 35781	
		-31- O H	/ 40	
Enter new mailing address, if applicable:		3315 Part	blud, #3 wk, FC, 33781	
(Mailing address MAY BE A POST OFFICE	BOX)	Minellas Pa	VK, FC, 33781	
				
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>ent</u>	er the name of the new registered	
	<u> </u>			
Name of New Registered Agent:				
Name of New Registered Agent.				
New Registered Office Address:	5315	Park blud, Enter Florida street addi	#3	
	Pinella	Dark ,	Florida 3278 (
		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 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
Ambr	The Expire Realty LLP	5315 Park blud, #3	□Add
	Realty CLP	5315 Park blid, #3 Pinellas Park, FC	□Remove
		33781	K Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			Change
	<u> </u>		□Ađd
			□Remove
			Change

lf an effecti <u>Note:</u> If t	e date, if other than the date of filing:
e record sprd is filed.	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	April 7+4. 220
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00