L18000069084

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

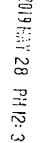
Office Use Only



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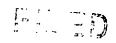


COVER LETTER

то:	Registration Se Division of Cor					
emp ne.		STRUCTION LLC				
SUBJE	Cr:	Name of Lim	ited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn all correspo	indence concerning this matter	to the following:			
		Armando Gonzalez, Jr				
			Name of Person			
			Firm/Company			
		Address ORLANDO, FL 32819				
		City/State and Zip Code ARMANDO@MYAIGHOME.COM E-mail address: (to be used for future annual report notification)				
For furtl	her information c	oncerning this matter, please co	all:			
Armando Gonzalez		407 346-6229 at ()				
	Name o	f Person	Area Code Daytin	e Telephone Number		
Enclosed	d is a check for th	ne 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)		
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 H .: 28 PH 12: 31 AIG 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 ____03/16/2018 and assigned Florida document number _____L18000069084 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: AG CONSTRUCTION SERVICES, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or 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: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address 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

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
			☐ Remove
		-	Change
			□ Add
			Remove
			☐ Change
			
			☐ Remove
			Change
•			
			Remove
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			☐ Remove
			☐ Change
			☐ Remove
			Change

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	MAY 23 2019
Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	MAY 23
	/// /
	H//

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Typed or printed name of signee

Filing Fee: \$25.00