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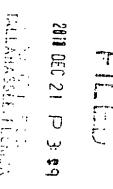
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| Special Instructions to | Filing Officer: | |
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COVER LETTER

| FO: Registration S Division of Co | | | |
|--------------------------------------|---|---|--|
| SUBJECT:\\ ↓ | A Brothers C | bnStruction U(| · · · · · · · · · · · · · · · · · · · |
| The enclosed Articles of | f Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | Victo | Name of Person | |
| | V4A F | Brothers Constr | uction UC |
| | 1223 | Blue Spring 1 | <u>I</u> +. |
| | Oloee | FL . 34761 City/State and Zip Code | |
| | hughe E-mail address: (| Errera 45@ 14000 to be used for future annual eport notifi | d.wm |
| For further information | concerning this matter, please ca | ali: | |
| VICTOY Name | Herr era | at (<u>32 </u>) <u>299 –</u> Area Code Daytime | 8761 Telephone Number |
| Enclosed is a check for (| he 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) |
| МАП | ING ADDRESS: | STREET/COURIE | ER ADDRESS: |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V+A Brothers 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 $\frac{5 30 2018}{4800013462}$ and assigned Florida document number $\frac{4800013462}{4800013462}$. |
| This amendment is submitted to amend the following: |
| A. If amending name, enter the new name of the limited liability company here: |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation" 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 |
| Florida |

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Blanca Herrera | Blanca Herrera | 1223 Blue Spring Ct. | 🗆 Add |
| | | 1223 Blue Spring Ct. Owel, FL 34761 | K Remove |
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| D. II ame | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| (If an efi Note: | ive date, if other than the date of filing: December 16, 2016 (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records. |
| | 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 | 12-1818. |
| | V, C+cX HQYQV Signature of a member or authorized representative of a member |
| | ViCtox Herrey - Ambre Typed or printed name of signee |

Page 3 of 3

Filing Fee: \$25.00