L18000 147009

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COVER LETTER

TO:

TO: Registration Se Division of Cor					
	RDIS CONSTRUCTION LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	WILLIAM M. MARDIS				
		Name of Person	_		
	W. M. MARDIS CONSTR	RUCTION, LLC			
		Firm/Company	· !! -	202	
	3282 CHRISTOPHER ST.		<u> </u>	2021 HAY	
	11.4.4	Address		=	**************************************
	PORT CHARLOTTE FL	33948) (1) (1) (1)	P	177
	MARDISCONSTRUCTIO	City/State and Zip Code		PM 4: 00	المسيدة
		to be used for future annual report notif	fication)	ω	
For further information c	concerning this matter, please c	all:			
WILLIAM M. MARDIS	;	863 990-1876 at ()			
Name o	f Person		e Telephone Number		
Enclosed is a check for t	he following amount:				
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate Certified C (additional co	of Statu Jopy	
Mailing Address Registration and Division of Control P.O. Box 632 Tallahassee,	Section Corporations 27		porations fallahassee e Street, Suite 819	0	
		Tallahassee, FL	32303		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited Li		<u>s.</u>)		
e Articles of Organization for this Limited Liability Company worlda document number <u>L180000147009</u> .			aı	nd assigned
is amendment is submitted to amend the following:				
If amending name, enter the new name of the limited liabil	ity company here:			
M MARDIS CONSTRUCTION LLC				
e new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC	" or the al	bbreviat	ion "L.L.C."
iter new principal offices address, if applicable:	3282 CHRISTOPHER ST	:	20	
rincipal office address MUST BE A STREET ADDRESS)	PORT CHARLOTTE FL 3394	8 <u>24 (24)</u> 7 - 1 2 - 1 - 1 2 - 1 - 1 2 - 1 - 1 2 - 1 - 1 2 - 1 2 - 1	NIH IS	
nter new mailing address, if applicable:	3282 CHRISTOPHER ST	111 11 11 11 11 11 11 11 11 11 11 11 11	L PM	
failing address MAY BE A POST OFFICE BOX)	PORT CHARLOTTE FL 3394	8	<u>.</u>	
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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 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>	Name	Address	Type of Action
MGR	WILLIAM M MARDIS	3282 CHRISTOPHER ST.	≣Add
		PORT CHARLOTTE FL 33948	□ Remove
			□Change
MGR	MARGARET A MARDIS	3282 CHRISTOPHER ST.	□Add
		PORT CHARLOTTE. FL 33948	■Remove
			Change □Change
AMBR	MARGARET A MARDIS	3282 CHRISTOPHER ST.	∃ °∃j < BAdd
		PORT CHARLOTTE FL 33948	P
		7	. ☐ ☐ Change
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ective date, if other than the one effective date is listed, the date must	be specific and cannot be pri	or to date of tiling or me	(op ore than 90 days af	ttonar) ter filing.) Pursua	nt to 605.0
te: If the date inserted in this blo	ck does not meet the appl	icable statutory filing	requirements, t	his date	will no	t be liste
cument's effective date on the De	partment of State's record	is.				
cord specifies a delayed effective is filed.	date, but not an effective	time, at 12:01 a.m. o	n the earlier of:	(b) Th	e 90th	day after
is med.						
ted MAY 10	2021					
ted	;	·				
William	n mand.	1.				

Filing Fee: \$25.00