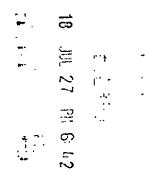
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Office Use Only



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5. PRATHER

COVER LETTER

TC		gistration Sect rision of Corp					
er.			CONSTRUCTION, LLC				
SU	ВЈЕСТ:	T:Name of Limited Liability Company					
Th	e enclosed	d Articles of A	mendment and fee(s) are subr	nitted for filing.			
Ple	ase returt	all correspon	dence concerning this matter t	o the following:			
			SERGIO CASTELAN GRA	ANILLO			
				Name of Person			
			CASTELAN CONSTRUC	TION, LLC			
Firm/Company							
	104 OREGON DRIVE						
				Address			
			FORT WALTON BEACH.	FL 32548			
				City/State and Zip Code	:		
			ZAPATAHERNANDEZ201	_		 	
				o be used for future annua	i report nonneano	n)	
Fo	r further i	nformation cor	ncerning this matter, please ca	II:			
SERGIO CASTELAN GRANILLO Name of Person			RANILLO		55-9014		
			Person	at () Area Code Daytime		c Telephone Number	
En	closed is:	a check for the	following amount:				
	\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CASTELAN 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 C	Company were filed on 07/06/2018	and assigned
Florida document number <u>L18000163542</u>		+ 18
This amendment is submitted to amend the following:		JUL 27
A. If amending name, enter the new name of the lin	nited liability company here:	7
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designatio	n "LLC" or the abbreviation "LL.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADD.	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ade Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street	address
	<u></u>	, Florida
	,	Zip Code
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and e accept the obligations of my position as registered of being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my dut agent as provided for in Chapter red office address. I hereby confi	ies, and I am familiar with and 605, F.S. Or, if this document is
	If Changing Registered Agent, <u>Sig</u>	nature 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
MGR	CASTELAN, SERGIO	104 OREGON DRIVE	
		FORT WALTON BEACH,	■ Remove
		F1. 32548	☐ Change
MGR	SERGIO CASTELAN GRANILLO	104 OREGON DRIVE	_■ Add
		FORT WALTON BEACH,	☐ Remove
		FI. 32548	7 0
			Add
		***************************************	☐ Remove
			□ Change
			☐ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change

	SERGIO CASTELAN GRANILI				~-;	
	Signature	of a member or authorized representative of a member		3- -	2	
	Just			<u>.</u> .	<u>'=</u>	
Dated	-26	. 2018	a ·	b	18	
The 90	Oth day after the record is fil	led.				
document	's effective date on the Department					
		filing: ic and cannot be prior to date of filing or more than 90 day not meet the applicable statutory filing requiremen				
	· · ·					
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Page 3 of 3

Filing Fee: \$25.00