## L18000 191063

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## **COVER LETTER**

Tallahassee, FL 32314

	Registration Se Division of Co			
SUBJEC		PRYWALL PROFECIONAL S	SERVICES LLC	
SUDJEC	- L	Name of Lin	nited Liability Company	<del></del>
The encle	osed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		BERTIN MURILLO ABE	REGON	
			Name of Person	<del></del>
		BERTIN DRYWALL PRO	OFECIONAL SERVICES LLC	
			Firm/Company	
		510 UNION STREET LO	TE 16-B	
			Address	
		FORT WALTON BEACH	I, FL 32547	
			City/State and Zip Code	<del></del>
		BERTINABREGO1992@0		
		E-mail address: (	to be used for future annual report no	tification)
For furthe	er information c	oncerning this matter, please c	all:	
BERTIN	MURILLO AB	REGO	470 345-1127	
Name of Person		f Person	Area Code Daytin	me Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 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		Street Address:	
	Registration S Division of Co		Registration Se Division of Co	
	P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## BERTIN DRYWALL PROFECIONAL SERVICES

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Frontier L.)	mined Elabinty Company)		
The Articles of Organization for this Limited Liability Con	npany were filed on $\frac{087}{2}$	/09/2018	and assigned
Florida document number L18000191063			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company he	re:	
BERTIN CONSTRUCTION, LLC			
The new name must be distinguishable and contain the words "Limited	d Liability Company," the de	esignation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	aa.		
	<del></del> -		
Enton non mallim address (C. 17.11			
Enter new mailing address, if applicable:		· · · · · ·	
(Mailing address MAY BE A POST OFFICE BOX)			
		<u>_</u>	
B. If amending the registered agent and/or registered of	ffice address on our re	ecords, <u>enter the name</u>	of the new regis
agent and/or the new registered office address here:			
			• •
Name of New Registered Agent:	·	<del></del> .	
New Registered Office Address:			
New Registered Office Address.	— Enter Flori	da street address	Zin Code
		on the man tab	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered A	gent:		
I hereby accept the appointment as registered agent and	l agree to act in this c	anacity. I further agri	ce to comply wi
ravisions of all statutes relative to the proper and non-	alata naufa F	and delice a set	the state of the s

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	Membe

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□Change
			□Remove
			Change
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N. C.			<u> </u>		_
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Effective date, if other than the an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	DIDCK GOES HOL HIGGE IN	ie applicable statuto	ng or more than 90 day ry filing requirement	optional) s after filing.) Pursuant to 60 s, this date will not be lis	5.0207 - ted as 1
e record specifies a delayed effected is filed.	tive date, but not an eff	ective time, at 12:0	I a.m. on the earlier	of: (b) The 90th day after	er the
Dated JULY 2	202	1			
M	Signapore of a member	or authorized represe	utative of a member		
Bo. 18		or printed name of si			

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