L18000193087

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DIVISION OF CURPORATIONE 22 MAY -9 PM 3: 15

T. MATTHEWS

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT:

City Works Group, LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Pelacz

Name of Person

City Works Group, LLC.

Firm/Company

782 NW 42nd AVE, Suite 429

Address

Miami, Florida 33126

City/State and Zip Code

Mpelaez@communitelusa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed 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 enclosed) \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)

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

<u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION 22 MAY -9 PH 3: 15 OF

City Works Group, 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 <u>August 13, 2018</u> and assigned Florida document number <u>L18000193087</u>

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 "LLC."

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, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street addres	
	, Flo	zip Code

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
		······································	🖾 Add
			□Add
			🗆 Remove
			🗖 Change
			🖸 Add
			🗆 Remove
			🖸 Change
			🗆 Add
			□Change
			□Add
			🖾 Change
			⊡∧dd
			🗆 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please, amend: ARTICLE III: Other Provisions, if any: CITY WORKS GROUP, LLC. WILL SERVE THE

PURPOSE OF CONSTRUCTION AND TRANSPORTATION. IN ADDITION TO INFORMATION

TECHNOLOGY SOFTWARE SERVICES AND SOLUTIONS; AND ANY AND ALL LAWFUL BUSINESS.

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 6 2022

Signature of a member or authorized representative of a member

Michael Pelaez

Typed or printed name of signee