## 118000196498

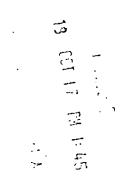
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Certified Copies	Certificates	of Status
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## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:		S CONSTRUCTION LLC		
		Name of Lim	ited Liability Company	<del></del>
The enclosed	l Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		RONALD J SALGUERO	PORTILLO	
			Name of Person	
		S P PAVERS CONSTRUC	CTION LLC	
			Firm/Company	<del></del>
		611 60TH AVE W		
			Address	
		BRADENTON FL 34207		
			City/State and Zip Code	
		INFO@SPBRICKPAVER		
		E-mail address: (	to be used for future annual report notifi	cation)
For further in	nformation co	ncerning this matter, please ca	all:	
RONALDJ	SALGUERO	PORILLO	813 546-9345 at ( )	
	Name of	Person	at ()	Telephone Number
Enclosed is a	a check for the	following amount:		
■ \$25.00 F	illing 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:

Registration Section

TO:

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

S P PAVERS CONSTRUCTION LLC		
( <u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability Colorida document number L18000196498	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
		Ė
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	or the abbreyiation EleL.C."
Enter new principal offices address, if applicable:		27
Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		5. 5.
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, dress here:	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street address	
	Flori	
	City	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 Changing Registered Agent, Signature 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	WILTON E SALGUERO PORTILLO	611 60TH AVE W BRADENTON FL 34207	
	Vilton = salquevo.		
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Page 3 of 3

Filing Fee: \$25.00