118000 213935

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Whong form W18-104409				
Office Use Only				



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December 3, 2018

OGC ASSOCIATES ORLANDO CORP RAQUEL MOWRER 7065 WESTPOINTE BLVD, STE. 305 ORLANDO, FL 32835

SUBJECT: AG&L CONSTRUCTION LLC

Ref. Number: L18000213935

We have received your document for AG&L CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 118A00024736

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Se Division of Cor							
01:13.41		NSTRUCTION LLC						
Name of Limited Liability Company								
The en	iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please	return all correspo	ndence concerning this matter	to the following:					
		RAQUEL MOWRER						
	Name of Person OGC ASSOCIATES ORLANDO CORP							
Firm/Company 7065 WESTPOINTE BLV STE 303								
	Address ORLANDO - Fl. 32835							
	City/State and Zip Code INFO@OGCORLANDO.COM							
		E-mail address: (to be used for future annual report notif	ication)				
For fur	rther information co	oncerning this matter, please co	all:					
RAQL	JEL MOWRER		407 9854404 at ()					
Name of Person				: Telephone Number				
Enclos	ed is a check for th	ne following amount:						
□ \$2	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				

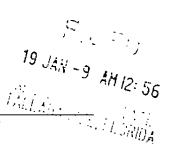
MAILING ADDRESS:

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



AG&L CONSTRUCTION LLC

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

		.0%
The Articles of Organization for this Limited Liability Con	npany were filed on 09/07/2018	and assigned
Florida document number L18000213935	,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
AG&L General Services LLC		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
(Principal office address MUST BE A STREET ADDRES	SS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		enter the name of the i
on the second se	<u></u>	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	en.	. • 4
	, F10	rida Zip Code
New Registered Agent's Signature, if changing Registered A	•	,
I haraby accept the appointment as registered agent an	d garge to get in this capacity. I fur	ther garee to comply with

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

or removed from our records: MGR = Manager 19 JAN -9 AH 12: 56 AMBR = Authorized Member <u>Address</u> Type of Action Title Name | ☐ Remove ☐ Change _ _ _ 🗆 🗖 Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change \square Add ☐ Remove ☐ Change □ Add ☐ Remove _

Change □ Add ☐ Remove ☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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		TO CARROLL SE PERMON
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Effective date, if other than the If an effective date is listed, the date mus	it be specific and cannot be prior to day	(optional) le of fifing or more than 90 days after filing.) Pursuant to 605.0207
Note: If the date inserted in this bl document's effective date on the D		statutory filing requirements, this date will not be listed as
ne record specifies a delayed The 90th day after the rec		effective time, at 12:01 a.m. on the earlier of
DatedDated	2019	
	Sa de Bessa Signature of a member or authorized	C= 11 6

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00