

L18000 257 630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

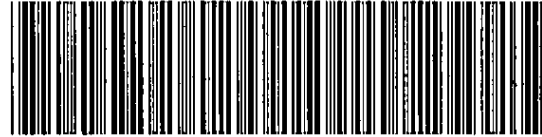
(Business Entity Name)

(Document Number)

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R. WHITE  
OCT 03 2019

2019 SEP 20 AM 10:59

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BROWNHAWK BUILDERS 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:

ALMA R PALACIOS MAYA

Name of Person

BROWNHAWK BUILDERS LLC

Firm/Company

3200 OLD WINTER GARDEN RD APT 1432

Address

OCOE FL 34761

City/State and Zip Code

sebastian.palacios71415@gmail.com

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

For further information concerning this matter, please call:

ALMA R PALACIOS MAYA

Name of Person

863

at ( )

Area Code

280-4370

Daytime Telephone Number

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 (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

2019 SEP 20 AM 10:59

BROWNHAWK BUILDERS 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 11/02/18 and assigned  
Florida document number L18000257630

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 "L.L.C."

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

Name of New Registered Agent: ALMA R PALACIOS MAYA

New Registered Office Address: 3200 OLD WINTER GARDEN RD APT 1432

Enter Florida street address

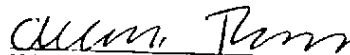
OCOE, Florida 34761

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>	<u>Address</u>	<u>Type of Action</u>
MGR	RAMON PAZ	3200 OLD WINTER GARDEN RD APT # 1432	<input checked="" type="checkbox"/> Add
		OCOE, FL 34761	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALMA R PALACIOS MAYA	3200 OLD WINTER GARDEN RD APT# 1432	<input checked="" type="checkbox"/> Add
		OCOE, FL 34761	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

  
Signature of a member or authorized representative of a member

RAMON PAZ      Ramon Paz  
Typed or printed name of signee