L190000 26826

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05/27/19--01008--013 *****



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Eister land Const	imited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
Brandon Eister Name of Person			
Eister land Construction Firm/Company	<u>u 110</u>	2019 MAR 27 SEGRETAGE FALL ALLASS	ĄF
4746 Swordfish 5t. Address	· · · · · · · · · · · · · · · · · · ·	##1 1	PROV
Address			En En
Braila Springs Fi 30 City/State and Zip Code	4134	25.1€ 1.1€	
brandine, s@aol.com			
E-mail address: (to be used for future annual rep	port notification)		
For further information concerning this matter, please	call:		
Branden Eister all	239, 848-8014		
Name of Person	Area Code & Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amou	nt:		
🙎 \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		

INHS18 (2/14)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eisterlan	d Construct	tion LLC	
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears o ed Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L 190000 Z68Z6</u>	ny were filed on	1-28-19	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here	;	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the desig	gnation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:			3
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TENSEE FLORE	PPROVEU AND FILED FILED
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ur records, <u>enter t</u> l	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	street address	
	··-	, Florida	
	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	Brandon Eister	4746 Swordfish St. Bonita Springs, FL 341	⊠ Add
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