L19 000030518

(Reques	stor's Name)	
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(City/Sta	ate/Zip/Phone #)	
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COVER LETTER

ARCO ENGINEERING CONSULTANTS, LLC

Registration Section Division of Corporations

Tallahassee, FL 32314

BJECT:	Name of Lin	nited Liability Company				
e enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
ase return all correspond	ondence concerning this matter	to the following:				
	Maaz Israr					
		Name of Person				
	Arco Engineering Consult	ants, LLC				
		Firm/Company				
	10503 NW 5 Manor					
	Address					
	Plantation, FL 33324					
		City/State and Zip Code				
	maaz.arcoeng@gmail.com					
	E-mail address: (to be used for future annual report not	ification)			
or further information of	oncerning this matter, please c	all:				
Maaz	: Israr	954 445-5891				
Name of Person		at () Area Code Daytin	ne Telepho	one Number		
Enclosed is a check for t	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	0	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres		Street Address:				
Registration S Division of C		· ·	Registration Section Division of Corporations			
P.O. Box 632			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARCO ENGINEERING CONSULTANTS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) January 30, 2019 he Articles of Organization for this Limited Liability Company were filed on and assigned L19000030518 lorida document number his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) i. If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

ew Registered Agent's Signature, if changing Registered Agent:

City

If Changing Registered Agent, Signature of New Registered Agent

mending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager 1BR = Authorized Member

<u>le</u>	<u>Name</u>	Address	Type of Action
3R	Lindsay Israr	10503 NW 5 Manor	\equiv Add
		Plantation, FL 33324	□Remove
			□Add
			□Remove
			□Change
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: If the date inserte	r than the date of filing the date must be specific and d in this block does not re to on the Department of S	neet the applicable	late of filing or more to statutory filing rea	(optiona han 90 days after filit quirements, this da	l) ng.) Pursuant to 605.0207 te will not be listed as
ord specifies a delay filed.	ved effective date, but not	an effective time	, at 12:01 a.m. on th	ne earlier of: (b)	The 90th day after the
d	January 27	. 2021			
		Km	ace		
		(7%)			
	Signature of a	J	ed representative of a	member	

Filing Fee: \$25.00