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Amend

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COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:		BUILDERS LLC		
SOME I		Name of Limi	ited Liability Company	
The enclose	d Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return	n all correspoi	ndence concerning this matter	to the following:	
		JUAN F. SOTO MURILL	.0	
			Name of Person	
		IMPERIAL BUILDERS L	LC	
			Firm/Company	
		3200 38TH ST. SW		
			Address	
		LEHIGH ACRES, FL 339	76	
			City/State and Zip Code	
		CARLOS@IMPERIALSEA		
		E-mail address: ()	to be used for future annual report notif	ication)
For further i	information co	oncerning this matter, please ca	all:	
JUAN F. SOTO MURILLO 239 246-6718				
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for th	e 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

IMPERIAL 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 $\frac{02/25/2019}{}$ and assigned 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 "LLC." 601 E. Elkcam Circle Enter new principal offices address, if applicable: Unit B2 (Principal office address MUST BE A STREET ADDRESS) Marco Island, FL 34145 601 E. Elkcam Circle Enter new mailing address, if applicable: Unit B2 (Mailing address MAY BE A POST OFFICE BOX) Marco Island, FL 34145

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:	CARLOS MONTANEZ				
New Registered Office Address:	601 E. ELKCAM CIRCLE, UNIT B2				
	Enter Florida street address				
	MARCO ISLAND	Florida 34145			
	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>	Type of Action
MGR	JUAN F. SOTO MURILLO	3200 38TH ST. SW	
		LEHIGH ACRES, FL 33976	
			Remove
			Change
MGR	CARLOS MONTANEZ	601 E. ELKCAM CIRCLE	
		UNIT B2	
			☐ Remove
		MARCO ISLAND, FL 34145	☐ Change
ngr	Oscar Garcia	LOUI E. El Kcam	CirckXuu
		marco is land,	Remove 3 d1/5
			Change
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