## L190000 76613

Office Use Only



400330202784

08/17/13--01030--003 \*\*23.00

JUN 2 7 2019 I ALBRITTON

## **COVER LETTER**

•	istration So ision of Cor	porations		
SUBJECT:	4 SIBLIN	GS CONSTRUCTION LLC		
		Name of Lin	nited Liability Company	· <del></del>
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		SANDRA V GARCIA		
		4 SIBLINGS CONSTRUC	Name of Person	
	Firm/Company 4504 STATE ROAD 574 LOT 53			
		PLANT CITY, FL 33563	Address	
		*	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For further in	formation co	oncerning this matter, please ca	all:	
SANDRA V	GARCIA		813 650-1961	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 Fil	ling 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

4 SIBLINGS CONSTRUCTION LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	anv as it now appears on our records.) Liability Company)	
the Articles of Organization for this Limited Liability Company lorida document number L19000076613	were filed on 03/19/2019	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	pility company here:	
ne new name must be distinguishable and contain the words "Limited Liab	lity 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)		201
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
nter new mailing address, if applicable:		<del>-1</del> · · · · · · · · · · · · · · · · · · ·
lailing address MAY BE A POST OFFICE BOX)		= = =
		<del>9.</del> 0
If amending the registered agent and/or registered of	ffice address on our records, <u>ente</u>	r the name of the
gistered agent and/or the new registered office address her	<u>e</u> :	
Numa a C Name De Contra de la contra del la contra del la contra del la contra del la contra de la contra de la contra del la contra		
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

MGR = N	January	•	
AMBR = A	Authorized Member	•	
<u>l'itle</u>	<u>Name</u>	<u>Address</u>	Type of Action
	ROSCELIN VAZQUEZ	4504 STATE ROAD 574 LOT 53	<u>,</u>
MGR		PLANT CITY, FL 33563	□ Add
			Remove
			□ Change
			□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Remove
			□ Change
			□ Remove
			☐ Change
	-		
			☐ Remove
			□ Change

		•	<del></del>	
		<u></u>	-	
		-		
	<del></del>			
		<u>-</u>		
<del></del> -				
		,		
			<del></del>	
			·	
<del></del>				
				·
<del> </del>		<del>_</del>		
			· · · · · · · · · · · · · · · · · · ·	
ffective date, if other than th	e date of filing:		, .	
an effective date is listed, the date m	ust be specific and cannot be pr	rior to date of filing or	more than 90 days afte	i <b>onal)</b> r filing.) Pursuant to 605,02
lote: If the date inserted in this locument's effective date on the l	hock does not meet the app	blicable statutory fil	ing requirements, th	is date will not be listed :
	soparation of state \$ 1000	ds.		
record specifies a delaye	ed effective data, but	not an affactive	hi 12 04	
	cord is filed.	not an enective	time, at 12:01	a.m. on the earlier
The 90th day after the re				
The socii day after the re				
ILINE 10	2019			
the sour day after the re				
ILINE 10	2019		('Ch	
IUNE 10	2019	thorized representative	ve of a member	

Page 3 of 3

Filing Fee: \$25.00