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COVER LETTER

	egistration Se ivision of Cor			
SUBJECT		CASTLE GARCIA CONSTR	UCTION LLC	
SUBJECT	·	Name of Limi	ted Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please retui	rn all correspo	ndence concerning this matter	to the following:	
			OSE L CASTILLO PEREZ Name of Person Pirin/Company 2600 NW 112ND ST	
		,	Address	-
			MIAMI, FL 33167	
			City/State and Zip Code	
			slkdcastillos@gmail.com	
		E-mail address: (t	o be used for future annual report n	otification)
For further	information co	oncerning this matter, please ca	ll:	
_	JOSE L CAS	TILLO PEREZ	786 440-4295 at ()	
	Name of	Person	Area Code Dayt	ime 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:

TO:

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

CASTLE GA	ARCIA CONSTRUCTION LLC		
(Name of the Limited L (A F	ability Company as it now appears lorida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on	04/09/2019	and assigned
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the words	"Limited Liability Company," the de-	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	: 		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>		19 JIL 15 AH
B. If amending the registered agent and/or in registered agent and/or the new registered office		our records, <u>ente</u>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Floria	la street address	
			
_	City	, Florida _	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
AMBR	ARTURO GARCIA CATU	2600 NW 112ND ST MIAMI, FL 33167	Add
			■ Remove
			Change
			Add
			□ Remove
			Change
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			Remove
			□ Change
			Add
			☐ Remove
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.,	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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`an cfi <u>lote:</u>	ive date, if other than the date of filing: (optional) fective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated	04603.19
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Alturo Garage Color Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00