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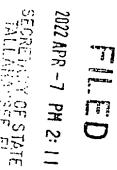
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A. BUTLER APR 2 7 2022

## **COVER LETTER**

TO:	Registration Sec Division of Corp		<b>å</b>	•			
		INSTRUCTION COMPANY	LLC	•			
Name of Limited Liability Company							
The en	closed Articles of a	Amendment and fee(s) are sub	mitted for filing				
		ndence concerning this matter	v				
rieasc	return an correspor	idence concerning this matter	to the following.				
		ANDERSON TOVAR					
			Name of Person	_			
		A TOVAR LLC					
		<del></del>	Firm/Company				
		7341 SW 102 AVE					
			Address				
		MIAMI, FL 33173					
			City/State and Zip Code	<del></del>			
		CHTO04@HOTMAIL.COM	M to be used for future annual repor				
r e .	.t :		•	a nonneation)			
		oncerning this matter, please ca					
ANDE	RSON TOVAR		305 502-63 at ()				
	Name of	Person	Area Code D	aytime Telephone Number			
Enclos	ed is a check for th	e following amount:					
<b>≅</b> \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address		Street Addre	<del></del>			
	Registration S Division of Co		Registration	n Section Corporations			
	P.O. Box 632			of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

TOVAR CONSTRUCTION COMPANY LLC

2022 APR -7 PM 2: 12

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

TALLA The Articles of Organization for this Limited Liability Company were filed on  $\frac{04/10/2019}{}$ and assigned Florida document number 1.19000098793 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: A TOVAR LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C." 7341 SW 102 AVE Enter new principal offices address, if applicable: MIAMI FL 33173 (Principal office address MUST BE A STREET ADDRESS) 7341 SW 102 AVE Enter new mailing address, if applicable: MIAMUFL 33173 (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address , Florida City 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
N/A	N/A	N/A	□Add
			□Remove
			□Change
			□ Add
			□Remove
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Effective date	if other than the date of is listed, the date must be specif	filing:	s data of Glina or more	(optional)	) Pursuant to 605 020
Note: If the da	e inserted in this block does	not meet the applical	ole statutory filing re	equirements, this date	will not be listed a
document's eff	ctive date on the Departmen	t of State's records.			
	s a delayed effective date, bu	it not an effective tim	ne, at 12:01 a.m. on t	the earlier of: (b) T	ne 90th day after the
rd is filed.		i			
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	Signature	of a member or aption	ized representative of	a member	

Filing Fee: \$25.00