

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MIAMI DECK & SHADES LLC

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V. GULKER

OCT 15 2020

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Corporate Filing Menu

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October 13, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MIAMI DECK & SHADES LLC
8074 SEVERN DR
APT C
BOCA RATON, FL 33433US

SUBJECT: MIAMI DECK & SHADES LLC
REF: L19000161375

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a corporation, but your entity is a llc. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

FAX Aud. #: H20000355038
Letter Number: 920A00020105

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI DECK & SHADES 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 06/19/2019 and assigned
Florida document number L19000161375

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DEVCON CONTRACTING LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

350 W PALMETTO PARK ROAD

UNIT 208C

BOCA RATON FL 33432

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

380 W PALMETTO PARK ROAD

UNIT 208C

BOCA RATON FL 33432

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

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

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated October 9

2020

Signature of a member or authorized representative of a member

MESUT LEOPOLD ARSLAN

Typed or printed name of signee

Filing Fee: \$25.00