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| PICK-UP                   | ☐ WAIT            | MAIL      |
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| Certified Copies          | Certificates      | of Status |
| Special Instructions to F | Filing Officer:   |           |
|                           |                   |           |
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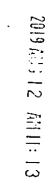
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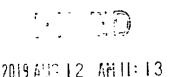
## **COVER LETTER**

| TO:       | Registration Se<br>Division of Cor |  |   |  |
|-----------|------------------------------------|--|---|--|
| CHD IE    |                                    | AM CONSTRUCTION SERV                                   | ICES LLC  |  |
| SUBJE     | Ç1;                                | Name of Limi   | ited Liability Company  |  |
|           |                                    | Amendment and fee(s) are sub-                          | _   |  |
| Please ro | eturn all correspo                 | ndence concerning this matter  NORVIN HERNANDEZ J      | ·   |  |
|           |                                    | VALENTEAM CONSTRU                                      | Name of Person JCTION SERVICES LLC                                  |  |
|           |                                    | 175 HIDDEN SPRINGS C                                   | Firm/Company  |  |
|           |                                    | KISSIMMEE. FL 34743                                    | Address   |  |
|           |                                    | City/State and Zip Code HERNANDEZVALENTIN97@ICLOUD.COM |   |  |
| For furt  | her information c                  | E-mail address: (                                      | to be used for future annual report notif<br>all:                   | ication)   |
| NORVI     | N HERNANDEZ                        |  | 781 7967579   |  |
|           | Name o                             | f Person   | Area Code Daytime   | : Telephone Number   |
| Enclose   | d is a check for the               | ne following amount:                                   |   |  |
| \$25      | .00 Filing Fee                     | ☐ \$30.00 Filing Fee &<br>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) |
|           | MAII                               | ING ADDRESS:   | STREET/COURT  | FR ADDRESS:  |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



VALENTEAM CONSTRUCTION SERVICES 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  $\frac{06/24/2019}{}$ and assigned Florida document number L19000165636 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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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 nev registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

\_\_ Florida \_\_\_

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 |
|--------------|---------------------|--|----------------|
| MGR          | NORVIN HERNANDEZ JR | 175 HIDDEN SPRINGS CR<br>KISSIMMEE, FL 34743 | ₩ Add          |
|              |                     |  | Remove         |
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| E. Effective date, if other than the date of filing:  (If an effective date, if other than the date of filing:  (If an effective 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 (3)  Note: If the date inserted in his block does not need the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  (b) The 90th day after the record is filed.  Dated  **MN2019**  **Dated Management**  Signature of a member or authorized representative of a member | _        |  |
|---|----------|--|
| F. Effective date, if other than the date of filing:  |          |  |
| E. Effective date, if other than the date of filing:  | _        |  |
| E. Effective date, if other than the date of filing:  | -        |  |
| E. Effective date, if other than the date of filing:  | -        |  |
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| E. Effective date, if other than the date of filing:  (If an effective 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 (3)(  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.  If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  (b) The 90th day after the record is filed.   | -        |  |
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| (b) The 90th day after the record is filed.  Dated  | Note:    | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the |
| Dated S/8/2019  Lucus Hunder  Signature of a member or authorized representative of a member  |          |  |
| Account Hunder Signature of a member or authorized representative of a member   | Dated    | 8/8/2019   |
| Signature of a member or authorized representative of a member  |          | Name Hander  |
|   |          | Signature of a member or authorized representative of a member   |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00