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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

Office Use Only 07/06/2/



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COVER LETTER

TO: Registration S Division of Co			
	GA CONSTRUCTION MANA	GEMENT LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	JUAN CARLOS GONZA	LEZ	
		Name of Person	
	SUVILLAGA CONSTRU	CTION MANAGEMENT LLC	
		Firm/Company	
	11411 NW 7TH STREET		
		Address	
	MIAMI FL 33172		
	·	City/State and Zip Code	
	JC@SCM-FL.COM	to be used for future annual report noti	tication)
For further information	concerning this matter, please c		Teanon,
JUAN CARLOS GONZ		305 323-8380 at ()	e Telephone Number
Name (of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		2971
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, (= Certificate of Status; & Certified Copy 1 (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63. Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUVILLAGA CONSTRUCTION MANAGEMENT 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 L	iability Compan	y were filed on 06/24/2019	and assigned
Florida document number L19000165670		-	
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited lia	bility company here:	
N/A			
The new name must be distinguishable and contain the w	ords "Limited Liab	oility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or r agent and/or the new registered office addre		address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	N/A		10
New Registered Office Address:	N/A		<u> </u>
		Enter Florida street address, Florid City	a 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	FRANCISCO PIVIDAL	11923 SW 155 COURT MIAMI FL 33196	= Add
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ective time, a	at 12:01 a.m. c	on the earlie	r of: (b)	The 90th c	lay after the
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or authorized	representative	of a member			
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	be prior to date applicable appli	be prior to date of filing or me applicable statutory filing records. Sective time, at 12:01 a.m. of the properties of authorized representative	be prior to date of filing or more than 90 d. applicable statutory filing requireme ecords. Sective time, at 12:01 a.m. on the earlie	be prior to date of filing or more than 90 days after file applicable statutory filing requirements, this decords. Sective time, at 12:01 a.m. on the earlier of: (b) or authorized representative of a member	be prior to date of filing or more than 90 days after filing.) Pursual applicable statutory filing requirements, this date will not records. Sective time, at 12:01 a.m. on the earlier of: (b) The 90th of a member or authorized representative of a member

Filing Fee: \$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUVILLAGA CONSTRUCTION MANAGEMENT LLC

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

	(. e riorida estino	a manny company	
The Articles of Organization for this Limited L		ny were filed on <u>06/24/2019</u>	and assigned
Florida document number L19000165670			
This amendment is submitted to amend the following	owing;		
A. If amending name, enter the new name of	f the limited li	ability company here:	
N/A			
The new name must be distinguishable and contain the w	ords "Limited Lia	ibility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." In the principal offices address, if applicable: N/A			
Mailing address MAY BE A POST OFFICE BOX)			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		ect address Florida
B. If amending the registered agent and/or r	egistered offic	anddress on our records, enter the	name of the new registered
		e address on our records. enter the	manie Witherite Wiegistered
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		2021
New Registered Office Address:		Enter Florida street address	<u> </u>
			la
		City	Zip Chde
New Registered Agent's Signature, if changing b	Registered Ager	<u>it:</u>	
I hereby accept the appointment as registere provisions of all statutes relative to the prope accept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this company has been notified in writing of this content.	er and comple stered agent a registered offic	te performance of my duties, and I s provided for in Chapter 605, F.S.	am fami li ar with and . Or, if this document is
	<u>It Ci</u>	nanging Registered Agent, Signature of Ne	ew 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
MGR	FRANCISCO PIVIDAL	11923 SW 155 COURT MIAMI FL 33196	≣ Add
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an effective date is listed, the date must of the late inserted in this bloom.	he specific and cannot be prior to do ak does not meet the applicable	ite of tiling or more than 90 day statutory filing requirement	s after filing.) Pur <u>su</u> ant to 60 .s., this date will not be li:)5. 02 0 steď a
ocument's effective date on the Dep	partment of State's records.	, , ,	21	
ecord specifies a delayed effective is filed.	date, but not an effective time,	at 12:01 a.m. on the earlier	of: (b) The 90th day att	er the
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nted May 27	. 2021			
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	ignature of a member or authorize	d representative of a member		
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Filing Fee: \$25.00