L19000188166

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COVER LETTER

SUBJECT:	Construct	tion Mangement Solutions of Flo	rida, LLC	
		Name of Lim	ited Liability Company	
The enclosed Ar	ticles of Ar	mendment and fee(s) are sub	mitted for filing.	
		ence concerning this matter	· ·	
			Lisa Booker	
			Name of Person	
		Construction	Mangement Solutions of Florida, LLC	
			Firm/Company	
			7231 Little Rd	
			Address	
			New Port Richey, FL 34654	
			City/State and Zip Code	
			ctionmanagements.com to be used for future annual report noti	fication)
For further inform	mation con	cerning this matter, please ca	ıll:	
Lisa B	iooker			•••
Name of Person		at (<u>813</u>) <u>838-3</u> Area Code Daytim	e Telephone Number	
Enclosed is a che	ck for the f	following amount:		
□ \$25.00 Filing	g 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: Registration Section			Street Address: Registration Sec	ction

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

and the second second

Registration Section Division of Corporations

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONSTRUCTION MANGEMEN			
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appear nited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Comp	oany were filed on	7/22/2019	and assigned
lorida document numberL19000188166			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	liability company he	<u>re</u> :	
Construction Management Solutions of	Florida, LLC	_	
he new name must be distinguishable and contain the words "Limited	Liability Company," the d	esignation "LLC" or	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	<u> </u>		2024
			The East Total
			- E
nter new mailing address, if applicable:			TS TO TO
Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	F. 05
	· · · · · · · · · · · · · · · · · · ·		
3. If amending the registered agent and/or registered offgent and/or the new registered office address here:	fice address on our ro	ecords, <u>enter th</u>	e name of the new regis
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
	<u> </u>	Floric	
	City		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>	Name	Address	Type of Action
	Dave Mannherz		□Add
		7231 Little Road NEW PORT RICHEY, FL 34654	∑ Remove
			□Change
			□Add
			□Remove
		_ _	□Add
		- 	Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Remove
			□Change
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 9/30/2023 (optional)
(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)(b) 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. October 15 Dated Signature of a member or authorized representative of a member Lisa Booker Typed or printed name of signee