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## **COVER LETTER**

Div	ision of Corp	orations				
SUBJECT:		ENEZ CONSTRUCTION LL	C			
SUBJECT.		Name of Limi	ited Liability Company			
The enclosed	d Articles of A	amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		ALEXIS ORTIZ JIMENEZ	Z.			
			Name of Person			
		ORTIZ JIMENEZ CONST	RUCTION ELC			
			Firm/Company	<del></del>		
	Firm/Company 1518 G AND H DRIVE  Address  KISSIMMEE, FL 34744					
			Address			
		KISSIMMEE, FL 34744				
			City/State and Zip Code			
		OJCONSTRUCTION01@C	SMAIL.COM			
		E-mail address: ()	to be used for future annual report notifier	tion)	مید دائد	
For further i	nformation co	ncerning this matter, please ca	all:		Ť	- •
ALEXIS OF	RTIZ JIMENI	žΖ	407 692-3106 at ()		. 3	
	Name of	Person	Area Code Daytime T	elephone Number	- - - - -	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enclosed is	a check for the	e following amount:			€D Cut	
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee Certificate of St Certified Copy (additional copy is o	tatus &	st

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORTIZ JIMENEZ CONSTRUCTION LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Liability Companys	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.19000245588}{1.19000245588}$	were filed on 9-30-2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
OJ CONSTRUCITON ELC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1518 G AND H DRIVE	
(Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE, FL 34744	
		_: 
Enter new mailing address, if applicable:		13 Th
(Mailing address MAY BE A POST OFFICE BOX)		) )
		7
		5
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		r the name of the new
Name of New Registered Agent:	<del>, -</del>	
New Registered Office Address:		
	Enter Florida street address	
	Florida _	
	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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		10-01-2019			
f an effective date is lis <b>Note:</b> If the date ins	ther than the date of ted, the date must be spec- terted in this block does to date on the Departme	cific and cannot be prior is not meet the application	able statutory filing re	(optional) than 90 days after filing.) P equirements, this date wi	ursuant to 605.0207 If not be listed as
e record specific The 90th day a	es a delayed effec fter the record is	tive date, but no filed.	t an effective tim	e, at 12:01 a.m. or	the earlier of
OCTOBER 1		2019	<u>.</u> .		
	Al				

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Typed or printed name of signee

Filing Fee: \$25.00