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Office Use Only



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TO THE PROPERTY OF THE PARTY OF

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## **COVER LETTER**

TO:

TO: Registration So Division of Co			
	PITALITY CONSULTING, LI	LC	
SUBJECT:	Name of Lim	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PABLO OLEAURRE		
		Name of Person	
	POK CONSTRUCTION I	LLC	
		Firm/Company	
	6711 POINT HANCOCK	DRIVE	
		Address	
	WINTER GARDEN, FL 3	4787	
		City/State and Zip Code	<del></del>
	ADSCPA13@GMAIL.COI		
		to be used for future annual report no	stification)
For further information of	concerning this matter, please c	all:	
PABLO OLEAURRE		407 616-4914 at ( )	
Name o	of Person		me Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 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 Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	
Tallahassee.	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POK HOSPITALITY CONSULTING LLC

( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company orida document number L19000258520	were filed on 10/15/2019	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
OK CONSTRUCTION LLC		
ne new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the al	obreviation "L.L.C."
nter new principal offices address, if applicable:	6711 POINT HANCOCK DRIVE	
Principal office address MUST BE A STREET ADDRESS)	WINTER GARDEN, FL 34787	
nter new mailing address, if applicable:	6711 POINT HANCOCK DRIVE	
Mailing address MAY BE A POST OFFICE BOX)	WINTER GARDEN, FL 34787	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nan	ne of the new regis
Name of New Registered Agent:		6 ) 
New Registered Office Address:	C. Classes	-73
	Enter Florida street address	<u> </u>
<del></del>	, Florida , Florida	Zip Code:
ew 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 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
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
		<del></del>	□Add
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fective (	date, if other than the date of filing: (optional)
ın effectiv	e 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 605.02
	ne date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a seffective date on the Department of State's records.
ocument'	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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record sp	Frenker 7 <sup>5</sup> . 2021.
ecument' record sp is filed.	

Filing Fee: \$25.00