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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2020

ERICA CRETER
SALTY FINS CONSTRUCTION SERVICES, LLC
216 1ST STREET
ST AUGUSTINE, FL 32080

SUBJECT: SALTY FINS CONSTRUCTION SERVICES, LLC

Ref. Number: L19000273413

We have received your document for SALTY FINS CONSTRUCTION SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 420A00005425

Shelia H Young Regulatory Specialist II

www.sunbiz.org

TO:

Registration Section Division of Corporations

SUBJECT: SAITH FINS CONST. Name of Limited	ruction Services, LLC 1 Liability Company
The enclosed Articles of Amendment and fee(s) are submit	tted for filing.
Please return all correspondence concerning this matter to	the following:
Erica C Salty F 216 19	Name of Person Fins Construction Services Firm/Company Street Address Address
5altyfins R	City/State and Zip Code City/State and Zip Code be used for future annual report notification)
For further information concerning this matter, please call Name of Person	at Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\square \text{\$30.00 Filing Fee & Certificate of Status}	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

AKTICLES OF AMENDMENT

TO
ARTICLES OF ORGANIZATION
OF

Salty 1	Fins 1	Construc	ction	Sen	100	5,
(Name of the Limit	ed Liability Co. (A Florida Limit	npany as it now appeted Liability Company	ears on our record	<u>ls.</u>)		,
The Articles of Organization for this Limited L Florida document number <u>L 9 CCO2</u>	iability Compa 13413	any were filed on _	1111	9	_ and as	ssigr
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name o	f the limited l	iability company	<u>here</u> :			
The new name must be distinguishable and contain the v	vords "Limited L	iability Company," the	e designation "LLC	or the abbre	viation "I	IIC
Enter new principal offices address, if applic	able:			<u> </u>	26 N	
(Principal office address MUST BE A STREE	ET ADDRESS	<u> </u>		<u> </u>	_ <u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u> BOX)</u>				3 AM 8: 34	3 y 4 t
B. If amending the registered agent and/or agent and/or the new registered office addre		ice address on our	r records, enter	the name o	of the no	<u>ew r</u>
Name of New Registered Agent:		211.19	T CTVI	-! -72T	_	
New Registered Office Address:		Enter F	ilorida street addre	- L]		
	STA	NUSTINE		orida	320	8
		City			Zip Code	e

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this docum 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of A
mbr.	Nathan Cretei	2/4/8/5/Veet STANG, FZ 32080	XAdd
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. II amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
All an affactive	late, if other than the date of filing:
document's	s effective date on the Department of State's records.
the record sp cord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a
Dated	1/30 2020
	Signature of a member of authorized representative of a member
	Anna Crieta
	Typed or printed name of signee

Filing Fee: \$25.00