## 6190000000

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(Document Number)	
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R. HUNT 03/27/27

## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: Rus	Sell Nelson C Name of Lim	Onstruction UC	<u></u>
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	_ Russell_	Name of Person	
	Russell	Welson Construct	ion UC
	625 Nh	/ Grenate St	
	Port St Lu	Cie, Fl. 34983 City/State and Zip Code	
	Russell 11l E-mail address: (	ISON 1234@6mail to be used for future annual report noti	Con fication)
For further information co	oncerning this matter, please c	all:	ra Oi
Rassell D	Person		0733 e Telephone Number
Enclosed is a check for th	ne 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 Addres Registration S		<u>Street Address:</u> Registration Se	ction
Division of C	orporations	Division of Cor	rporations
P.O. Box 632 Tallahassee, I		The Centre of T	Fallahassee le Street, Suite 810
i mininasce, i		= 115 11, 1110Hit	

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Russell Melson Constructi	on LLC	·		
(Name of the Limited Liability Compan (A Florida Limited Lia	as it now appears or bility Company)	i our records.)		
The Articles of Organization for this Limited Liability Company we Florida document number LPCO 291503.	ere filed on <u>MC</u>	BV-25, 2019	and assigned	
L 19 000 29 1503				
his amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liability</u> $RGN Construction Gro$				
The new name must be distinguishable and contain the words "Limited Liability	y Company," the desig	nation "LLC" or the abbi	reviation "L.L.C."	
Enter new principal offices address, if applicable:			7	
Principal office address MUST BE A STREET ADDRESS)		• • • • • • • • • • • • • • • • • • • •		
		. <u></u> ·		
			್ ಸಾ ಗು	
Inter new mailing address, if applicable:		: <del>-</del>		
Mailing address MAY BE A POST OFFICE BOX)		nj.	<del></del>	
		म	77	
3. If amending the registered agent and/or registered office adgent and/or the new registered office address here:	dress on our reco	rds, <u>enter the name</u>	of the new regist	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
		, Florida		
	City	,	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
lew Registered Agent's Signature, it changing Registered Agent:  hereby accept the appointment as registered agent and agree	to act in this cap	acity. I further agre	e to comply wi	

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
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Note: If the date	f other than the dat s listed, the date must be inserted in this block tive date on the Depar	does not meet the	e applicable stat	f filing or more than utory filing requi	(optiona 90 days after filir rements, this da	l) ig.) Pui te will	rsuant to I not be	o 605.020 listed a
	cifies a delayed ef y after the record		out not an ef	fective time,	at 12:01 a.m	ı. on	the e	arlier (
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	121/2027	, 	·					
The 90th day	Sen	MUL M	or authorized rea	presentative of a me	mber			_

Page 3 of 3

Filing Fee: \$25.00