

L70 000035852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

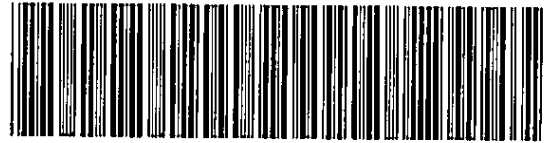
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Lisandra Colon ⁽¹⁰⁾
Advised to Add
suffix to Name
6.18.20

Office Use Only



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JUN 1 2020

2020 JUN 1 PM 12:27

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cc/ccis
Amend/Name
chg

JUN 18 2020

NOTION

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: CONSTRUCTIONIZE, LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LISANDRA M. COLON

Name of Person

CONSTRUCTIONIZE, LLC.

Firm/Company

3901 BELLEWATER BLVD

Address

RIVERVIEW, FL 33578

City/State and Zip Code

lisadramarie@hotmail.com

E-mail address: (to be used for future annual report notification)

For information concerning this matter, please call:

A M. COLON

Name of Person

813 616-0120
at (_____) _____
Area Code Daytime Telephone Number

Check for the following amount:

- ☐ 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)

Address:
Registration Section
Division of Corporations
327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CONSTRUCTIONIZE LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JANUARY 29, 2020 and assigned
Florida document number L20000035852.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

EVA CONSTRUCTION GROUP LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

'Principal office address MUST BE A STREET ADDRESS'

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Enter new mailing address, if applicable:

'Mailing address MAY BE A POST OFFICE BOX'

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida**

City

Zip Code

Registered Agent's Signature, if changing Registered Agent:

I 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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is submitted 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

our records: authorized to manage, enter the title, name, and address of each person being added

MGR = Manager

AMBR = Authorized Member

[illegible]

[illegible]

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 current's effective date on the Department of State's records.

cord 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
 filed.

Wilson

Signature of a member or authorized representative of a member

LISANDRA M. COLON

Typed or printed name of signee

Filing Fee: \$25.00