L20000103700

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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11/25/20

COVER LETTER

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	gistration Se vision of Cor			
SUBJECT		truction Management LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		David Creel		
			Name of Person	
		Creel Construction Manag	ement LLC	
			Firm/Company	
		3530 Walk In Water Rd		
			Address	
		Lake Wales FL 33898		
			City/State and Zip Code	
		ftr.cdl@verizon.net		
		E-mail address: (to be used for future annual report not	ification)
For further	information co	oncerning this matter, please co	all:	
David Cree	·I		at (
	Name of	f Person	at ()	ne 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)
Re	ailing Addres	Section	Street Address: Registration Se	
	vision of C O. Box 632	orporations 7	Division of Co The Centre of	
	illahassee, F			pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF 2020 OCT 20 PH 1: 04

FILED

Creel Construction Management LLC

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SECRETARY OF STATE
(Name of the Limited Liability Company as it now appears on our records.) FIASSEE, FI.
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on $\underline{\mathcal{N}}$	115/20	and assigned
Florida document number L20000103700			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company her	e:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the des	ignation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our rec	ords, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	la street address	
		Florida	Zip Code
	City		Lip 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Principal	Jason D Creel	3530 Wałk In Water Rd	= Add
		Lake Wales FL 33898	□Remove
			□ Change
			□Add
			□Remove
		<u> </u>	Change
			□Add
			□Remove
			□ Change
			□Add
		-	□Remove
			□Change
			□Remove
			Change
			CJAdd
			□Remove
			□ Change

				
				
*·=				
				
				
				
	<u>.</u>			
				
fective date, if other than the da	09/28/2020 ate of filing:		(optional)	
an effective date is listed, the date must be	specific and cannot be prior		n 90 days after filing.) Pursuant (
ote: If the date inserted in this block ocument's effective date on the Depa	rtment of State's records.		rements, this date will not b	e nsted as
record specifies a delayed effective di is filed.	ate, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) The 90th day	after the
is med.				
	2020			
September 28,				
ated September 28,		<u> </u>		
			and a	_

Filing Fee: \$25.00