## L2000138342

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Oity Otto E.p.) (Issue I.y
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
, ,
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:



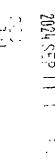
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## COVER LETTER

TO:	Registration Sec Division of Corp		<b>4 4 5</b>		
	YLG Constr	ruction, LLC	•		
SUŖJE	ECT:	Name of Limit	ted Liability Company		•.
The en	closed Articles of a	Amendment and fee(s) are subr	nitted for filing.		
Please	return all correspo	ndence concerning this matter t	to the following:		
		Yohandri Lopez			
			Name of Person	-	
		YLG Construction, LLC			
		10431 NW 35th Place	Firm/Company	-	
				. <del>_</del>	
		Miami, FL 33147	Address		
		info@ylgconstruction.com	City/State and Zip Code	_	
		E-mail address: ()	to be used for future annual report notification)		
	ther information c dri Lopez	oncerning this matter, please ca	all: 305 457-7193		
	Name o	f Person	at ()	er	
Enclos	sed is a check for th	ne following amount:			
<b>□</b> \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	Filing Fee. cate of Status & ed Copy cal copy is enclosed)	
	Mailing Address Registration 5 Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite Tallahassee. FL 32303	2024 STP 11 (1)	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YLG Construction, LLC		<u> </u>
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company  Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our recor	ds, enter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	treet address
		Florida
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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
MGR	Anisury Perez	10431 NW 35th Place Miami, FL 33147	
			<b>=</b> Add
		<u></u>	□ Remove
			□ Change
			🗖 Add
			□Remove
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			Remove
			□Change

of filing:	filing.) Pursuant to 605,020 date will not be listed a
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cific and cannot be prior to date of filing or more than 90 days after as not meet the applicable statutory filing requirements, this	filing.) Pursuant to 605,020
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