## 120 000 174956

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Dx	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

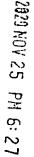


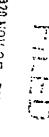
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11/25/20--01008--028 \*\*55.80

MAN 11 2021

S. YOUNG:





## COVER LETTER

TO:

TO: Registration S Division of Co			
CLICK AND CASE	NTRACTING LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MIGUEL G FONSECA LO	OPEZ	
		Name of Person	
	GMG CONTRACTING L	LC	
		Firm/Company	····
	12628 SW 211 STREET		
		Address	
	MIAMI, FL. 33177		
		City/State and Zip Code	
	MIGUELFONSECA764@0		
For further information	E-mail address: ( concerning this matter, please or	to be used for future annual report notif	lication)
MIGUEL G FONSECA		305 244-4124	
Name	of Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for	the following amount:		
□ S25.00 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)
<u>Mailing Addre</u> Registration		Street Address:	vion
<del></del>	Corporations	Registration Sec Division of Corp	
P.O. Box 63	27	The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GMG CONTRACTING LLC

company has been notified in writing of this change.

( <u>Name of the Limited Liability Com</u> (A Florida Limited	nany as it now appear Liability Company)	s on our records.)
The Articles of Organization for this Limited Liability Compan	y were filed on <u>06</u> /	23/2020 and assigned.
Florida document number L20000174956		23 75
This amendment is submitted to amend the following:		温、宝、红
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> : 27
GMG BROTHERS LLC		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the d	esignation "LLC" or the abbreviation "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)		
The state of the s	•	
B. If amending the registered agent and/or registered office	address on our re	ecords, <u>enter the name of the new registere</u>
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	ida street address
		. Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>ı:</u>	
I hereby accept the appointment as registered agent and ag	gree to act in this o	capacity. I further agree to comply with the
provisions of all statutes relative to the proper and complet	c performance of	my duties, and I am familiar with and
accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic	s provided for in C	Chapter 605, F.S. Or, if this document is

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
			□Add
			□Remove
			□ Change
		<del></del>	□Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change
			□Add
		□Remove	
			□ Change

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ffectiv	e date, if other than the date of filing:
<u>ote:</u> 1.	the date inserted in this block does not meet the applicable statistory filing requirements, this date will not be listed as
etimei	nt's effective date on the Department of State's records.
record	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
l is tile	1.
ated $\frac{N}{2}$	OVEMBER 19 3020
	Z 11/11 \ \ \ /
	Signature of a member or authorized representative of a member

Typed or printed name of signee