L20000198545

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COVER LETTER

SUBJECT:	Name of Lim	ited Liability Company	202:
		, ,	3 0CT -
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	:
Please return all correspo	ndence concerning this matter	to the following:	2023 OCT -4 PH 12: 2
	YOANY PORTALES		2
		Name of Person	
	PORTALES EXCAVATION	ON & DEMOLITION LLC	
		Firm/Company	
	12130 SW 41 DRIVE		
		Address	
	MIAMI, FL 33175		
		City/State and Zip Code	
	PORTALESED77@GMA1		
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	all:	
YOANY PORTALES		305 345-9951	
Name o	f Person		Telephone Number
	f Person	at ()	Telephone Number
Enclosed is a check for the	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 Statu Certified Copy (additional copy is encl

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 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

PORTALES EXCAVATION & DI	EMOLITION LLC		· 1
(Name of the Limit	ed Liability Company as it no (A Florida Limited Liability C	ow appears on our records.) ompany)	<u> </u>
The Articles of Organization for this Limited L Florida document number L20000198545	iability Company were file	ed on	2 and assigned 2
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability com	ıpany here:	
The new name must be distinguishable and contain the vector new principal offices address, if applied the experimental office address MUST BE A STREET	eable:	any," the designation "LLC" or	the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u></u>		
B. If amending the registered agent and/or agent and/or the new registered office addre		on our records, <u>enter th</u> e	e name of the new registered
Name of New Registered Agent:	YOANY PORTALES		
New Registered Office Address:	12130 SW 41 DRIVE	<u>-</u>	
		Enter Florida street address	
	MIAMI	. Flori	da 33175

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	<u>Address</u>	Type of Action
AMBR	YARLENIS SUAREZ BENITEZ		□Add
		12130 SW 41 DRIVE MIAMI, FL 33175	■Remove
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			□ Add
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Filing Fee: \$25.00