## L20 000207998

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

CHRIECT.		struction LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Almir Rolim		
			Name of Person	
		Rolim Construction LLC		
			Firn/Company	
		3556 Pilot Cir.		
			Address	
		Naples, FL 34120		
			City/State and Zip Code	
		rolimconstruction@gmail.co		
		E-mail address: (	to be used for future annual report no	otification)
For further in	nformation co	oncerning this matter, please ca	ail:	
Almir Rolim	ı		239 2692276 at ()	
	Name of	Person	at () Area Code Dayti	me Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	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)
Rep Div P.C	iling Address gistration S vision of Co D. Box 632 Iahassee, F	section orporations 7	Street Address: Registration S Division of C The Centre of 2415 N. Mon	orporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rolim Construction LLC		
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our la Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability C Florida document number 1.20000207998	Company were filed on	and assigned
This amendment is submitted to amend the following:		· · · · · · · · · · · · · · · · · · ·
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, g	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
	Cin.	FloridaZip Code
	City	Στρ 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 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	Almir Rolim	3556 pilot cir.	■Add
		Naples, FL 34120	□Remove
			□Change
			□ Add
			□ Remove
			□Change
			□Add
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e: If the date inserted in this ble	ock does not meet the app	licable statutory filing	requirements, this dat	e will not be listed as
ument's effective date on the Do	epartment of State's recor-	ds.		
cord specifies a delayed effective filed.	e date, but not an effective	e time, at 12:01 a.m. c	n the earlier of: (b) T	he 90th day after the
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Typed or printed name of signee