6/17/2021

Division of Corporations

(((H21000238993 3)))

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000238993 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Page: 2 of 6

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ISAMAR TORRES Account Number : I20200000137 : (786)660-0108 Phone : (786)364-1047 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.* Email Address: info@yourdreamms.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IMPERIUM CONSTRUCTION LLC

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\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

(((H21000238993.3)))



Page: 3 of 6

COVER LETTER

TO: Registration Se			(((H21000238993 3))
Division of Cor	porations		
	M CONSTRUCTION LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub		
Please return all correspo	ondence concerning this matter	to the following:	
	JIMY ABONIA		2021 SE TAL
		Name of Person	CRET
		Juny Abonia Fri Company	TARY OF
	7493 ACE RD E	<i>y</i>	TILL ANIO: 01 SECRETARY OF STATE TALL ANIASSEE, FLORID
		Address	
	LAKE WORTH, FE 3346	7	
		City/State and Zip Code	
	imperiumeonstructionfille@	genail.com to be used for future annual report notification	<u>n) </u>
For further information c	concerning this matter, please c		•
JIMY ABONIA		561 4608475	
Name o	t Person	at ()	phone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddres</u> Registration		<u>StreetAddress:</u> Registration Section	
Division of C		Division of Corporate	tions
P.O. Boy 632		The Centre of Tallah	nassee

(((H21000238993 3)))

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

To: 18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H21900238995-31))

IMPERIUM CONSTRUCTION LLC			
(Name of the Limited Liability Compa (A Florida Limited	ny a <u>s it now appears on our records.</u>) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000218590</u> .	were filed on 07/24/2020 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ollity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	7493 ACE RD E		
(Principal office address MUST BE A STREET ADDRESS)	LAKE WORTH, FL 33467		
Enter new mailing address, if applicable:	7:193 ACE RD E		
Mailing address MAY BE A POST OFFICE BOX)	LAKE WORTH, FL 33467		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registere		
Name of New Registered Agent: YOUR DE	YOUR DREAM MULTISERVICES CORP		
New Registered Office Address: 8300 NW	53RD ST SUITE 350		
	Enter Florida street address		
MIAMI	, Florida 33166		
	City Zip 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.

Gour Dream Multiservices Corp If Clanging 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

Page: 5 of 6

(((H21000238993.3)))

17863641047

Title	<u>Name</u>	Address	Type of Action
AMBR	ANDERSON ABONIA	7493 ACE ROAD EAST	
		LAKE WORTH, FL 33467	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Пкеточе
			□Change
			□Remove
			Change
			□Add
			Петюче
H)))	(21(00)238993-3)))		□Change

2021-06-17 17:35:32 UTC

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From: your dres

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Effective date, if other than If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific and cannot be s block does not meet the a	eprior to date of filing or mapplicable statutory filin	(option ore than 90 days after file g requirements, this d	ing.) Pursuant to 605.0	207 (3 Las th
ne record specifies a delayed effe ord is filed	ctive date, but not an effect	tive time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after t	lıc
Dated <u>JUNE 17</u>	2021	·			
	(:	16			
	Signature of a pleinberfor	rauthorized representative	of a member	<u> </u>	
	V				
	IIMV /	ABONIA r printed name of signee			

(((H210002389933)))

Filing Fee: \$25.00