L20000259327

Office Use Only



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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

	NSTRUCTION LLC			
SUBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	EDUARDO MENDOZA			
		Name of Person		
	EMLC CONSTRUCTION			
	*****	Firm/Company		
	7777 SW 86 ST APT 313			
		Address		
	MIAMI FLORIDA 33143			
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	bpbre89@gmail.com			
	E-mail address: (to be used for future annual report no	tification)	
For further information of	concerning this matter, please c	all:		
EDUARDO MENDOZA	\	305 3845458 at ()		
Name o	F Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	¥ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration Section		
Division of C	•	Division of Co	-	
P.O. Box 632	2.1	The Centre of	rananassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EMILC CONSTRUCTION LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Com	npany were filed on L20000259327 and assigned		
Florida document number L20000259327			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	SS)		
	<u></u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
agent and/or the new registered office address here:	ffice address on our records, <u>enter the name of the new registere</u>		
New Registered Office Address:	Enter Florida street address		
	, Florida		
New Registered Agent's Signature, if changing Registered A	Agent:		
provisions of all statutes relative to the proper and com- accept the obligations of my position as registered agen	d agree to act in this capacity. I further agree to comply with the aplete performance of my duties, and I am familiar with and not as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability		
- 1	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	BRUNELLA V MENDOZA	7777 SW 86 ST APT 313 MIAMI FL 33143	= Add
			□Remove
			□Change
MGR G	GRACE C LOZADA		□ Add
		7777 SW 86 ST APT 313 MIAMI FL 331343	≣Remove
			□Change
			□Add
			□Remove
		□Change	
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Effective date, if oth (If an effective date is liste Note: If the date inser document's effective of	d, the date must be s ited in this block o	e of filing: specific and can does not meet	the applicable st	of filing or more tha	(optional) n 90 days after filing. irements, this date) Pursuant to 605.0207 (3 will not be listed as th
he record specifies a del ord is filed.	ayed effective dat	e, but not an e	ffective time, at	12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
Dated JULY 28,)			
	Sign	ature of a memi	per or authorized r	epresentative of a m	ember	
	11	/				

Filing Fee: \$25.00