L7C000303710

(Requ	iestor's Name)	
(Addre	ess)	
(Addr	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busin	ness Entity Na	me)
(Доси	ıment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	





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COVER LETTER

Registration Section
Division of Corporations

allahassee, FL 32314

BUILDERS REALTY SOURCE LLC BJECT: Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following: KENNETH SERRANO Name of Person BUILDERS REALTY SOURCE LLC Firm/Company 7550 SOUTHLAND BLVD SUITE 105 Address ORLANDO, FL 32809 City/State and Zip Code INVOICE@GENESISCONTRATOR.COM E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: **ETH SERRANO** Name of Person I is a check for the following amount: 00 Filing Fee □ \$55.00 Filing Fee & □ \$30.00 Filing Fee & □ \$60.00 Filing Fec, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **1ailing Address:** Street Address: legistration Section Registration Section Division of Corporations **Division of Corporations** .O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUILDERS REALTY SOURCE LLC

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our recor ability Company)	<u>ds.</u>)
: Articles of Organization for this Limited Liability Company v	were filed on	and assigned
ida document number L20000303710		
amendment is submitted to amend the following:		
f amending name, enter the new name of the limited liabil	ity company here:	
ew name must be distinguishable and contain the words "Limited Liabili	y Company," the designation "LL	C" or the abbreviation "L.L.C."
r new principal offices address, if applicable:		F % 3
cipal office address MUST BE A STREET ADDRESS)		ý
		EC
		$\overline{\omega}$
new mailing address, if applicable:		نين المساور ال
ng address MAY BE A POST OFFICE BOX)		
		C F
mending the registered agent and/or registered office address here: Name of New Registered Agent: New Registered Office Address:	ddress on our records, enter	
	t:	lorida
	City , F	Zip Code
stered Agent's Signature, if changing Registered Agent:		
accept the appointment as registered agent and agre s of all statutes relative to the proper and complete p sobligations of my position as registered agent as pa to merely reflect a change in the registered office of has been notified in writing of this change.	performance of my duties, a rovided for in Chapter 605,	and I am familiar with and F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

mending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

1BR = Authorized Member

Name	Address	Type of Action
LYNETTE QUINONES	7550 SOUTHLAND BLVD STE 105 ORLANDO FI	□Add
		= Remove
		□Change
KENNETH SERRANO	7550 SOUTHLAND BLVD STE 105	= Add
	ORLANDO, FL 32809	□Remove
		□Change
		□Add
		_ □Remove
		□Change
		□Add
		_ □Remove
		Change
		□Add
		_ □Remove
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		□Change

S PRESIDENT OF	THE LLC
	
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ve date if other th	nan the date of filing: (optional)
ective date is listed, the	date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
	n this block does not meet the applicable statutory filing requirements, this date will not be listed as on the Department of State's records.
	·
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
d.	
ECCUPED 14	2020
ECEMBER 14	2020
	A Contraction
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00