120000342309

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	-, - <u>.</u>
(Cit	y/State/Zip/Phone	e #)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 699506 7950399
AUTHORIZATION: Symbolic man
COST LIMIT : \$ 25.00
~~
ORDER DATE: March 10, 2021
ORDER TIME : 10:58 AM
ORDER NO. : 699506-010
CUSTOMER NO: 7950399
DOMESTIC AMENDMENT FILING
NAME: CONCONCRETO DESIGNS LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS: __

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

	Registration So Division of Co			
eun iez	CONCON	CRETO DESIGNS LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Vivian Pou		
			Name of Person	
		Jorge M Vigil, P.A.		
			Firm/Сотралу	
		265 Sevilla Avenue		
			Address	
		Coral Gables		
			City/State and Zip Code	
		vivian@jvigillaw.com		
		E-mail address: (to be used for future annual report no	otification)
For furth	er information of	concerning this matter, please c	all:	
Vivia Po	u		786 4974450	
	Name o	of Person	at () Area Code Dayti	rne Telephone Number
Enclosed	is a check for t	he following amount:		
■ \$25.0	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)
	Mailing Addre Registration		Street Address: Registration S	ection
	Division of C	Corporations	Division of Co	orporations
	P.O. Box 632 Tallahassee,		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 MAR 11 AM 9: 02

CONCONCRETO DESIGNS LLC		
(Name of the Limited Light (A Flor	pility Company as it now appears on our records Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Florida document number L20000342309	Company were filed on 11/06/2020	and assigned
This amendment is submitted to amend the following:	:	, ·
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	imited Liability Company," the designation "l	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		Florida
-	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.

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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Alvaro Martinez	1735 PONCE DE LEON BLVD.	= Add
		CORAL GABLES, FL 33 I34	□Remove
			□Change
VP	Seriozha Sergio Gonzalez	1735 PONCE DE LEON BLVD.	= Add
		CORAL GABLES, FL 33134	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
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			🗀 Add
			Пстоve
			[]Change
			□ Add
			□Remove
			□Change

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	The state of the s
ffective date, if other than the date of filing:	(optional)
un effective date is listed, the date must be specific and cannot be prior to lote: If the date inserted in this block does not meet the applicab	ole statutory filing requirements, this date will not be listed as
ocument's effective date on the Department of State's records.	
1 2 2 1 1 2 4 60 days days have not an affective time	a at 12:01 a.m. on the explication of (b). The 90th day after the
record specifies a delayed effective date, but not an effective time I is filed.	e, at 12.01 a.m. on the earter of. (b) The John day and the
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$a_{ated} = 3 loo/2021$	
Signature of a member or authori:	zed representative of a member
5.g.ma. 5 5	<i>F</i>

Filing Fee: \$25.00