120000359508

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COVER LETTER

TO:	Registrat Division o			(+		
		LEDAS C	CONCRETE PUMPING LLC			
SUBJE	CT:		Name of Limi	ted Liability Company		
The enc	losed Artic	eles of Ar	mendment and fee(s) are sub-	mitted for filing.		
Please re	eturn all co	orrespond	ence concerning this matter	to the following:		
			RAYMUNDO VILLEDA	FRANCO		
				Name of Person	_	
			VILLEDAS CONCRETE	PUMPING LLC		
				Firm/Company		
			23024 FAY ST SW SW			
				Address		
			LABELLE, FL 33935			
				City/State and Zip Code		
			E-mail address: (0	to be used for future annual report notif	ication)	
For furth	her informa	ation con	cerning this matter, please ea	all:		
RAYM	UNDO VII	LLEDA I	FRANCO	863 517-8341 at ()		
		Name of P	erson	Area Code Daytime	: Telephone Number	
Enclose	d is a check	k for the	following amount:			
■ \$25	.00 Filing I	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)	
		ition Se n of Coi	ction porations	Street Address: Registration Sec Division of Corp The Centre of T	porations	
P.O. Box 6327 Tallahassee, FL 32314			. 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number L20000359508		and assi	ig ne d
The Articles of Organization for this Limited Liability Company were filed on 11/12/2020 Florida document number L20000359508 This amendment is submitted to amend the following:	;	and ass	igned
Florida document number L20000359508			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the	abbrevia	ntion "L.I	C.''
Enter new principal offices address, if applicable:	TA.S.	202	
(Principal office address MUST BE A STREET ADDRESS)	ACS.	قدة 	
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	ASSEE, FLIRID	A	ĺΤ,
Enter new mailing address, if applicable:	<u> 下の</u> 考:	<u> </u>	-
(Mailing address MAY BE A POST OFFICE BOX)	\$. -	<u>6</u>	

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
AMBR	ALEXYS A VILLEDA PEREZ	23024 FAY ST SW LABELLE, FL 33935	= Add
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fective date, if other than the date in effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	e specific and cannot be prior to date of c does not meet the applicable statu	(op) filing or more than 90 days aft story filing requirements, th	er filing.) Pursuant to 6	05,0 2 0 isted as
ecord specifies a delayed effective dis filed.	late, but not an effective time, at 12	:01 a.m. on the earlier of:	(b) The 90th day af	fter the
May 10th	. 2023			
Raymuse V	/			