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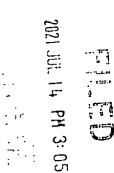
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corp	norations		
	nuction Services LLC		•
SUBJECT:	Name of Lami	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	Yira M Lee		
		Name of Person	
	Yirch Construction Service	s 1.1.C	
		Firm Company	
	13830 Tea Rose Di		
		Address	
	Orlando, florida 32828		
		City/State and Zip Code	
	yireheonstructionserviceslle E-mail address: ((digmath.com) to be used for future annual report of	confication)
For further information c	oncerning this matter, please c		
Yuu M Lee		443 7549379	
Name o	f Person	at () Area Code Day	time Telephone Number
Enclosed is a check for the	ne following amount:		
1 \$25,00 Filing Fee	I'l \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy additional copy is enclosed)	[7] \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		<u>Street Address</u> Registration	
Registration Division of C		Division of C	Corporations
P.O. Box 631	17		d'Tallahassee nroe Street, Suite 810
Tallahassee.	PT. 5251H	471 J. IV. IVIOI	HOU DIRECT CHIE HILD

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Yirch Construction Services LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny ay it now appears on our records.) hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.21000132669	were filed on March 22 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi		of the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13830 Tea Rose Dr	732)
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32828	Can B J
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13830 Tea Rose Di Orlando,F1, 32828	PH 33
B. If amending the registered agent and/or registered office	address on our records, enter th	ne name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flor	ida
	Chy	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 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	Natalia Gomez	5000 Solara Circle Apt # 13064 Sanford,F1, 32771	□Add
			⊨Remove
			IChange
MGR	Yira M Lec	13830 Tea Rose Dr Orlando, il 32828	\alpha \Add
			IIRemove
			L.Change
· —			FiAdd
			□Remove
			LTChange
-			
			□Remove
			:)Change
			□Add
			[ZRemove
			I lChange
			DAdd
			□Remove
			i lChange

Sinc	Natalia Gomez is no longer interested in be part of the LLC she would like to be unincluded for any responsa
In or	n good faith we cordially request that this amenimment be recived and treated as an aggrement between
the t	wo parties.
If yo	u have any questions please let me know.
-	
-	
i <u>te:</u> If t	date, if other than the date of filing: 07-13-202 (optional) we 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 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 's effective date on the Department of State's records.
s filed.	
ied C	Signature of a member or authorized representative of a member Yira M. Lee Typed or printed name of signee