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COVER LETTER

TO: Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Pecision Concrete Service LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
J. Amparo Avila Cisneras Name of Person
Firm/Company
912 W Camphor St.
Avan Park, Fl 3382-5 City/State and Zip Code Joseannara avila 778 Gmayl-cam
E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
J. Ampara Auria (Isheras at 863 257 6122 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations Street Address: Registration Section Division of Corporations

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

...

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Precision Concie	pte Service Lli	<u></u>
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) inuted Liability Company)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on 3/24/2021	and assigned
Florida document number <u>LƏ1000138463</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	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 ADDRE.	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		E 4
3. If amending the registered agent and/or registered o	ffice address on our records, enter the na	
gent and/or the new registered office address here:		<i>5</i> - •
		(4) (5)
Name of New Registered Agent:		ent.
New Registered Office Address:		ساسه سب
	Enter Florida street address	32
	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 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>	Name	Address	Type of Action
AMBR.	J. Amparo Aula	CISTIETUS 912 W Camphor St. Auch Paric, Fl	□Add
		3885	∑ □Remove
			ZiChange
			□Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
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			□Change
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			□Remove
			Change

. If amendi	ing any other infor	mation, enter ch	iange(s) here: (At	tach additiona	l shects, if nec	essary.)	
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(If an effective Note: If the	date, if other than we date is listed, the date he date inserted in thi is effective date on th	must be specific and s block does not m	cannot be prior to date eet the applicable st	of filing or more atutory filing re	(opti than 90 days after equirements, thi	r filing.) Pursuant to 6	05.0207 (3 isted as th
he record sp ord is filed.	occifies a delayed effe	ctive date, but not	an effective time, at	12:01 a.m. on t	he earlier of: (t	b) The 90th day a	fter the
Dated(oulials	031	·				
	3. Anfor	Signature of a n	OW NEW	epresentative of	a member		
	JAmpa	ro Avila	CiSacro Typed or printed nam	e of signee	DW ner		

Filing Fee: \$25.00