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04/20/21--01012--007 **25.00



COVER LETTER

Division of Corp	erations		
SUBJECT:		instruction LL	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	LOBO C 6166 Bo	Name of Person Onstruction 21 Firm/Company Address Address The struction 21 & gm To be used for future annual report notification 21 & gm	LLC
For further information cor	E-mail address: (neerning this matter, please co		ication)
Me vi	Person	at (<u>\$50</u>) <u>585</u> Area Code Daytime	- 1243 Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:	- . ::	Street Address:	•

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOBO Construction LLC (Name of the Limited Liability Company as it now appears on our records.)
(Name of the Limited Liability Company as It now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 3/24/2/ and assigned orida document number 2/000/394/3 This amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: 2080 Construction 2/ LLC The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviated "LLC" on the new principal offices address, if applicable: Articles of Organization for this Limited Liability Company were filed on 3/24/2/ and assigned orida document number 2/000/13/94/3 The amendment is submitted to amend the following: A principal place of the new name of the limited liability company here: A principal office address MUST BE A STREET ADDRESS) This important place address MUST BE A STREET ADDRESS) The amending address MUST BE A STREET ADDRESS This important place address address on our records, enter the name of the new registered tent and/or the new registered agent and/or registered office address on our records, enter the name of the new registered tent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:
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 abbreviat "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
- .
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the 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
Planida
City Florida 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Kevin FUQUA	6166 Barnes rd	\XAdd
		Crest view, FL 32536	□Remove
			□Change
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			□Remove
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ective date, if other t	han the date of t	iling:	1/12/2	021 (or	otional)	
effective date is listed, the te: If the date inserted attention that the term of the term	in this block does	not meet the applic	able statutory fil	more than 90 days at ing requirements, (fter filing.) Pursi this date will r	aant to 605,020 not be listed a
unent sencenve date	on the Department	of State's records	•			
cord specifies a delayed s filed.	l effective date, bu	t not an effective t	ime, at 12:01 a.m	. on the earlier of:	(b) The 90th	ı day after the
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Filing Fee: \$25.00