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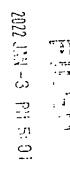
(Requestor's Name)
(Address)
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, , ,
(City/State/Zip/Phone #)
(Only Otale Elph Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Q. SILAS
JAN 14 2022





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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	I construct Air	HC	
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
Alfredo Vega Name of Person			
		Firm/Company	
	1 Pecan Cou	ITSE CIT Address	
	Ocala Pa Saresian	City/State and Zip Code Otruy @ amail . Cu to be used for Juture annual report noti	fication)
For further information	concerning this matter, please ea	ail:	
Name	of Person	at ()	e Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	S30.00 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 Registration Division of 0 P.O. Box 63	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

l construc	CH AIGHLE	ZUZZ JAN -3 - P所	5: 0
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now apported Limited Liability Compan	pears on our-records.	
The Articles of Organization for this Limited Liabili Florida document number <u>レ21000円830</u>	ty Company were filed on	03/26/21	and assigned
This amendment is submitted to amend the following	8;		
A. If amending name, enter the new name of the	limited liability company	here:	
The new name must be distinguishable and contain the words:	sian, ILC		
The new name must be distinguishable and contain the words	'Limited Liability Company," t	te designation "LLC" or the al	bbreviation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	——————————————————————————————————————). Box 830384 ala, R. 34483	
B. If amending the registered agent and/or regist agent and/or the new registered office address he		r records, <u>enter the nan</u>	ne of the new register
Name of New Registered Agent:	Madelaine V	ega	
New Registered Office Address:	Fntor	Florida street address	
	1.taer		
_	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
CEO	Madelaine Vega	1 Pecan Course Cir.	XAdd
		Ocala, 92 34472	□Remove
CEO_	_AIGTEDO VEGA	1 Pecan Coune Cir	□Add
		Orala R 34472	Remove
			□Change
MGR	Typone A Acusta, 2rd	321 NE 23rd Ave.	□Add
		Buyntan Beach, A 33+35	∕ Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Change

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fective	date, if other that	the date of filin	ıg:		(opti	onal)	
an effecti ote: If t	ve date is listed, the dat he date inserted in th	e must be specific an ris block does not	d cannot be prior t meet the applica	o date of filing or mobile statutory filing	ore than 90 days afte grequirements, thi	onal) r filing.) Pursuant to 60. is date will not be lis	5.0207 (ted as t
ocument	's effective date on t	he Department of	State's records.	, ,	,		
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is filed					in the earner or. (t	o) The 90th day afte	.i iiic
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ated	December	29111	2621	<u>-</u> .			
			Cn	~~			
	-	Signature of a	member or author	rizell representative	of a member		
		Made	1				