121000253164

(F	Requestor's Name)	
`	,	
-		
(A	(ddress)	
(A	Address)	
	City/State/Zip/Phone #)	
(C	.nty/State/Zip/Phone #)	
		гэ
☐ PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
`	, ,	
(L	Occument Number)	
Certified Copies	Certificates of	Status
·		
Special Instructions to	o Filing Officer:	

Office Use Only





000390867310

#17 (3/23 | 010)T--070 (**25.90

2022 JUL 19 PM 1: 30

COVER LETTER

TO: Registration Section Division of Corpor	n ations	•				
SUBJECT: BUILD	1 Right C	anstruction L	il			
	Name of Limi	ited Liability Company				
The enclosed Articles of Ame	endment and fee(s) are sub-	mitted for filing.				
Please return all corresponde	nce concerning this matter	to the following:				
	Adam	Canales IV	· 02			
•		Name of Person	2022			
	Build Rig	Mt Constructo	on UC Silver July 19			
	3125 715	St Street West	0 TH 1: 30			
	Lehigh	Acres FL 33	971 7 3			
		City/State and Zip Co	1 40 00			
-	<u>adam (</u>	to be used for future annual report additional	il.com			
Confirmation in Commention and	·	.)	•,			
For further information conce	f	m. O - (- ()				
Haam (a)	nales IV	at Area Code Daytime Telep	- 3427 phone Number			
Enclosed is a check for the fo	ollowing amount:					
\$25.00 Filing 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)			
Mailing Address:		Street Address:				
Registration Sec		Registration Section				
Division of Corp P.O. Box 6327	orations	Division of Corporat The Centre of Tallah				
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on _ Florida document number <u>L</u>2 1000 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 abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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

Title	Name O	Address OLTO III oclosus	Type of Action
HMBK	Benjamin Perri	8670 Wesleyan Dr	
		Hpt 315 Fort Myers, FL 339	□Remove
		Fort Mers, 12 201	☐ Change
			□Add
			□ Remove 2022
			Charige
			DAdd G
			∏ ⊒ □Remova
			⊖ Change
			□ Add
			□Remove
			□ Change
			\[\text{\text{Add}}
			□ Remove
			Change
			□Add
			□Remove
			∏ Change

						-		
			<u>. </u>					
								
							•	
		==						- -
				· · ·				
					<u>. </u>	*	→	2(
							~	2022 JJUL
<u> </u>						·		=
							/) /) 71 **	19
				•			··. ···.	3
		·					ύ > *	1: 30
								
 				<u>.</u>				
ffective date, if other an effective date is listed, the	he date must be specif	fic and cannot l	be prior to date	of filing or more	than 90 days af	tional) ter filing.) Pu	rsuant to	605.02
ote: If the date incerter	d in this block does to on the Departmen			atutory filing re	equirements, t	his date will	l not be	listed
			ctive time, at	12:01 a.m. on	the earlier of:	(b) The 90)th day	after th
ocument's effective date record specifies a delaye	ed effective date, bu	it not an effe						
ocument's effective date record specifies a delaye	ed effective date, bu	it not an effe						
record specifies a delayed is filed.	ed effective date, bu	it not an erre	122.					
record specifies a delayed is filed.	ed effective date, bu	$\frac{1}{2}$, $\frac{\mathcal{U}}{2}$	122.					
record specifies a delayed is filed.	28 u Alex	_ U	122.	epresentative of	a member			-

Filing Fee: \$25.00