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COVER LETTER

TO:

Tallahassee, FL 32314

	egistration Se ivision of Cor			
SHRIFCT	DB Constru	action and Repairs, LLC	•	
SOBJECT	•	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Daniel Beltran		
			Name of Person	
		DB Construction and Repa	irs, LLC	
	DB Construction and Repairs, LLC Firm/Company	7.2.2		
		5120 Idlewood Lane		
			Address	-
		Lakeland, FL 33811		
			City/State and Zip Code	
		= =		<u> </u>
For further	information c		•	tification)
Daniel Bel	tran			
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00	Filing Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed)
	ailing Addres		Street Address:	
	egistration S ivision of C	Section Corporations	Registration Se Division of Co	
	O. Box 632		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/Name of the Limited Lightlity Comp	any as it now appears on our	radords)
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	records.)
The Articles of Organization for this Limited Liability Company	v were filed on June 8, 201	21 and assigned
Plorida document number L21000265684		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
'he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designatic	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		<u>. 8</u>
		, (A
Enter new mailing address, if applicable:	·	
Mailing address MAY BE A POST OFFICE BOX)		N .
		PH
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records,	enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and agrowisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my dut provided for in Chapter	ties, and I am familiar with and 605, F.S. Or, if this document is

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>	<u>Address</u>	Type of Action
VP	Karina Sanchez Vazquez	5120 Idlewood Lane	□Add
		Lakeland, FL 33811	■Remove
			□Change
			🗇 Remove
			□Change
			□Add
			□Remove
			Change
			SHPAdd
			Remove
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ective date, if other than the da a effective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Depa	e specific and ca c does not mee	t the applical	o date of filing ble statutory	or more than 90 filing requirer	(option days after finents, this c	ling.) Persu	ant to 605,0 ot be listed
cord specifies a delayed effective das filed.	ate, but not un	effective tin	ne, at 12:01 a	in, on the ear	ier of: (b)	The 90th	day after t
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a // A							
ed 9-17-21 Som Dec	enature of a mer						

Filing Fee: \$25.00