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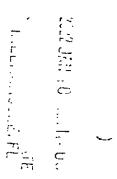
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A. BUTLER JAN 18 2022

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: CESGAL CONSTR	UCTION & REMODELING. LLC
Name of I	Limited Liability Company
The enclosed Articles of Amendment and fee(s) are s	submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
OBMILO (JESPEDES.
<u></u>	Name of Person
CESGAL CONS	STRUCTION & REMODELING- LLC-
4821 OLD	HARDEN BLVD.
	Address
LAKE	LAND FL 33813
:	City/State and Zip Code
	edes 1978 @ hotmall.com. s: (to be used for future annual report notification)
	·
For further information concerning this matter, please	
CAMILO CESPEDES	4582372.
Name of Person	Area Code Daytime 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CESGAL CONSTRUCTION & REMODELING LEC. 1. 60 (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) Florida document number _L21000364444 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 "LI.C" or the abbreviation "L.L.C." 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.

. 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

<u>Title</u>	Name	Address	Type of Action
AMBR.	CAMILO CESPEDES.	4821. OLD HARDEN BLVD	X Add
		LAKELAND FL 33813	
			□Change
			□Add
			□Remove
			ClChange
		-	🗆 Add
			□Remove
			□Change
			□Add
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Effecti	ive date, if other than the date of filing: $01/04/2022$ (optional)
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as tent's effective date on the Department of State's records.
record d is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated _	
Dated _	CAMILO CESPEDES G.
Dated ₋	

. . .

Filing Fee: \$25.00