8/24/2021

Florida Department of State

From: Tax Pro

Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: TAXPROS OF CLERMONT LLC Account Name

Account Number : I20210000146 Phone

: (352)660-1026

Fax Number

: (800)466-5730

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MARTIN COLLINS ENTERPRISES DBA MAC CONSTRUCTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

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Corporate Filing Menu

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TO:

Registration Section

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	CLERMONT FL 34711			
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Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

From: Tax Pro

H210003171423

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARTIN COLLINS ENTERPRISES DBA MAC CONSTRUCTION LLC

(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 08-18-2021 and assigned.
Florida document number 1.21000370985
Lis amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
MARTIN COLLINS ENTERPRISES LLC
he 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)
 If amending the registered agent and/or registered office address on our records, enter the name of the new registered igent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
City Zip Code
New Registered Agent's Signature, if changing Registered Agent:
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

H210003171423

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			[]Remove
			[] Change
			Cladd
			□Remove
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08/24	2021	
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1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00