# 121000 H19998

(Requestor's Name)
(Address)
(Address)
(123,000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,,
Contifued Coming
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
J. HORNE
J. HOIME
DEC 1 7 2021

Office Use Only



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FILED
2021 DEC -6 PM 7: 20
SECRE MAY PERSON

### **COVER LETTER**

TO: Registration Se Division of Cor	porations		
SUBJECT:	& K Ger	neral Contractor	<u> </u>
J	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	indence concerning this matter (	to the following:	
	Ka	Yame of Person	
		Name of Person	
	,	Firm/Company	
	304 Yach	Address  Beach FL 3.  City/State and Zip Code	VE
		Address	
	fort Walton	Beach FL 3.	2548
	Wahara	City/State and Zip Code	
	E-mail address: (t	(a (a) a a a c o M to be used for future annual report notif	ication)
For further information e	oncerning this matter, please ca	nil:	
Kaly	Lazo	at ( <u>\$50</u> ) <u>557</u> Area Code Daytime	2703
/Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 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 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

$\alpha$ $\alpha$ $\alpha$ $\alpha$ $\alpha$ $\alpha$	2021 DEC -6 PM 7:,20
UBX GENERAL CO	NIKACELAKKREDERSAL
//Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records LL AHASSEE, FLORER
The Articles of Organization for this Limited Liability Company were filed on Florida document number $21000419898$ .	. /
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	
LAZO GENERAL CONTRA	KTORS.LLC
The new name must be distinguishable and contain the words "Limited Liability Company." the dec	signation "L.L.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 re-	cords, enter the name of the new register
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florie	la 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 co	macity. I further agree to comply with t

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
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	<del> </del>
an effectiv <u>ote:</u> If th	date, if other than the date of filing:
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
is filed.	December 1 . 2021/2.
is filed.	December 1 . 2021/1.
l is filed.	December 1 2021).  Signature of a member of authorized representative of a member