10/6/21, 11:40 At

Division of Corporations

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To:

Divisio	n	of	Corporations

Fax Number : (850)617-6383

Account Name : RENNERT, VOGEL, MANDLER & RODRIGUEZ, P.A,

Account Number : 076103002011 Phone : (305)577-4163 Fax Number : (305)373-0791

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

Email	Address:		
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OCT - 7 2021

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COVER LETTER

TO: Registration S Division of Co			•
Evcor US			
SUBJECT:	Name of Lim	ited Liability Company	
	of Amendment and fee(s) are sub pondence concerning this matter	-	
	Claire Menard		
		Name of Person	
	Rennert Vogel Mandler &	Rodríguez, P.A.	
	p. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Firm/Company	
	100 SE 2nd Street, Suite 2	900	
		Address	,
	Miami, Florida 33131		
		City/State and Zip Code	
	cmenard@rvmrlaw.com		
,	E-mail address; (to be used for future annual report no	otification)
For further information	concerning this matter, please o	all:	
Claire Menard		305 577-4162	
Name	of Person	Area Code Dayti	me 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 & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr	ress:	Street Address;	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Evcor USA, LLC		F 2021 OCT SECRLTA ALLAHAS
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) iability Company)	CT CT
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000422898</u>		STATE STATE LORIC
This amendment is submitted to amend the following:		2)A
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil 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 a agent and/or the new registered office address here:	nddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	aZip Code
	City	Zip Code

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.

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	Address	Type of Action
MGR	RODNEY ROSENBERG	705 NE 94TH STREET, MIAMI SHORES, FL 33138	} _∰Add
			_ □Remove
			_ E]Change
MGR	ROD ROSENBERG	705 NE 94TH STREET, MIAMI SHORES, FL 33138	3 _□Add
			_ =Removė
			_ Change
			_ 🗆 Add
			□Remove
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Effective date, if other than the o	late of filing:	(optional)	Pursuant to 605.0207 (3
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statul	ory filing requirements, this date w	vill not be listed as th
the record specifies a delayed effective cord is filed.	date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The	90th day after the
October 6	2021		2021 SEC
Dated October 5	0-2		FI 2021 OCT - SECRETAR ALLAHASS
	Signature of a member or authorized repr	esentative of a member	
Claire P. Menard			PM 3: FSTA

Filing Fee: \$25.00

Typed or printed name of signee