

L21000440847

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
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Account Name : GARCIA GARCIA ASSOCIATES INC
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Phone : (305)823-9292
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STATE OF FLORIDA
DIVISION OF CORPORATIONS

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GODINEZ CONSTRUCTION SERVICES, LLC.**

Certificate of Status	0
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Page Count	01
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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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October 21, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GODINEZ CONSTRUCTION SERVICES, LLC.
106 NW 7TH AVE
BONESTRAD, FL 33030US

SUBJECT: GODINEZ CONSTRUCTION SERVICES, LLC.
REF: L21000440847

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Valerie Herring
Regulatory Specialist III

FAX Aud. #: B21000385685
Letter Number: 321A00025683

H210003856853

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GODINEZ CONSTRUCTION SERVICES, 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 10/08/2021 and assigned
Florida document number L21000440847.

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 "LLC" 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:

GODINEZ, SANTIAGO

New Registered Office Address:

106 NW 7TH AVE

Enter Florida street address

HOMESTEAD


Florida 33030

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 Changing Registered Agent, Signature of New Registered Agent

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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>	<u>Type of Action</u>
MGR	GODINEZ, SANTIAGO	106 NW 7TH AVE	<input type="checkbox"/> Add
		HOMESTEAD, FL 33030	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

AMMENDMENT DONE TO CORRECT REGISTER AGENT AND MGR LAST NAME

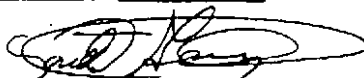
E. Effective date, if other than the date of filing: 10/12/2021 (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 10/12/ 2021



Signature of a member or authorized representative of a member

SANTIAGO GODINEZ

Typed or printed name of signee

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TALLAHASSEE
FLORIDA
STATE

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