## L21000467714

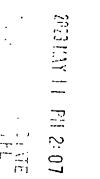
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## **COVER LETTER**

Registration Section

TO:

Division of Co	rporations			
	ISTRUCTION USA, LLC			
SUBJECT:	Name of Lir	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspondent	ondence concerning this matter	r to the following:		
	Gabriel E. Parra			
		Name of Person	<del> </del>	
	PRO CONSTRUCTION	USA, LLC		
		Firm/Company		
	9100 Conroy Windermer	e Rd		
	<del> </del>	Address	<del></del>	
	WINDERMERE, FL 347	86	2023 (1.5)	
	Stephanie@lagattatax.com	City/State and Zip Code		
	E-mail address:	to be used for future annual report not	ification)	
For further information of	oncerning this matter, please c	all;		
Gabriel E. Parra		407 848-7851 at ( )	20 Zi O	
Name o	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Ppy Certificate of Status &	
Mailing Addres Registration S	Section	<u>Street Address:</u> Registration Se	ction	
Division of Corporations P.O. Box 6327		Division of Cor	porations	
Tallahassee, I		The Centre of T	allahassee e Street Suite \$10	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRO CONSTRUCTION USA 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 10/27/2021 and assigned Florida document number L21000467714 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 "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) 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: Stephanie Sierraalta Name of New Registered Agent: 742 Saint Dunstan Way New Registered Office Address: Enter Florida street address \_, Florida 32792 Zip Code Winter Park

## 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

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
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			□Remove
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Filing Fee: \$25.00

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