# 121000509549

(R	requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(C	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	





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T. MATTHEWS JAN 18 2022

## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
ALID TISCOP	GJEKA BROTHERS CO	NSTRUCTION, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ROBERT J. KELLY, ESQ		
		Name of Person	<del></del>
	KELLY & KELLY, LLP		
		Firm/Company	
	605 PALM BLVD / SUITI	EΑ	
		Address	
	DUNEDIN, FLORIDA 34	698	
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report noti	fication)
For further information	concerning this matter, please ca	all:	
ROBERT	J. KELLY	727 733-0468	
Name (	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	the 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 Addre		Street Address:	ution
Registration Division of 0	Section Corporations	Registration Sec Division of Cor	
P.O. Box 63:		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 JFT - U PH 12: 39

GJEKA BROTHERS	CONSTRUCTION, LLC	<b>.</b>
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compare Florida document number 1.21000509549	ny were filed on DECEMBER 1, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designation "LLC" or the a	obreviation "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 offic agent and/or the new registered office address here:	e address on our records, <u>enter the nan</u>	ie of the new registered
Name of New Registered Agent:		
New Registered Office Address:		<del></del>
	Enter Florida street address	
	, Florida	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

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
AMBR	MARTIN GJEKA	12410 TROTTER COURT	
		TAMPA, FLORIDA 34626	■Remove
			□Change
			□Add
			□Remove
			☐ Change
		. <del></del>	🗆 🗆 Add
			□Remove
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			□Remove
			□Change
-		<del></del>	□Add
			□Remove
			□ Change

### Page 2 of 3

lf amen	ding any other information,	enter change(s) here:	: (Attach additional s	hects, if necessary.,	)
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<u>Note:</u> 11	e date, if other than the date tive date is listed, the date must be sp if the date inserted in this block don't's effective date on the Departi	pecific and cannot be prior to oes not meet the applica	CEMBER 1, 2021 o date of filing or more tha	<b>(optional)</b> n 90 days after filing.) lirements, this date w	Pursuant to 605.0207 rill not be listed as
	ord specifies a delayed effe 30th day after the record i		an effective time,	at 12:01 a.m. o	n the earlier of
Dated _	DECEMBER 1	. 2021		í	2
	Signa	uure of a member or author	te Gy	CK 9	
		DRITE GJE	•	-	
	-	Typed or printed	d name of signee		

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Filing Fee: \$25.00