7/14/22, 3:11 PM

To:

Division of Corporations

Florida Department of States DEVISION OF COMPANI

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 : (614)573-3996 Fax Number

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

C-sil	Addroce			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BROADWAY CONSTRUCTION GROUP FLORIDA, LLC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BROADWAY CONSTRUCTION GROUP FLORIDA, LLC	s on our records.)
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{12}{12}$ Florida document number $\frac{121000525157}{121000525157}$	/14/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, onter the new name of the limited liability company h	ere:
Broadway Construction Group (FL) LLC	Line in the abbreviation "LL.C."
Broadway Construction Group (FL) LLC The new name must be distinguishable and contain the words "Limited Liability Company," the	designation time to the discontinuous
Enter new principal offices address, if applicable:	202
(Principal office address MUST BE A STREET ADDRESS)	
1	
Enter new mailing address, if applicable:	
	C
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	5
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Enter I	Florida street address
	, Florida
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

To:

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			🗆 Add
÷ .			□Remove
			☐ Change
			□∧dd
<u></u>			□Remove
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			□Add
mangaran dang proper danam			□Remove
			Change

mending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
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	(optional)
If an effective day Note: If the d document's ef	(optional) e; if other than the date of filing: te is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 are inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed fective date on the Department of State's records.
	ties a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
	11/2000
Dated	1/4/2022
·	The state of the s
	Signature of a member or authorized representative of a member
73.	De Ress
H	ya Braz. Typed or printed name of signee