

122000023193

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2022 MAR 28 PM 6:09

SECRETARY OF STATE  
TALLAHASSEE, FL

cf 4/4/2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ALPERO GENERAL CONTRACTING LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ATTN: TAPANES

\_\_\_\_\_  
Name of Person

FLORIDA LEGAL & RETIREMENT PLAN EXPERTS LLC

\_\_\_\_\_  
Firm/Company

603 SW 18 COURT

\_\_\_\_\_  
Address

CAPE CORAL, FL 33991

\_\_\_\_\_  
City/State and Zip Code

FLEGALRETIREMENTEXPERTS@OUTLOOK.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS TAPANES

239 645-7691  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime 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)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

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

**Street Address:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 MAR 28 PM 4:18

SECRETARY OF STATE  
TALLAHASSEE, FL

March 1, 2022

ATTN: TAPANES  
FLORIDA LEGAL & RETIREMENT PLAN EXPERTS  
603 SW 18 COURT  
CAPE CORAL, FL 33991

SUBJECT: ALPERO GENERAL CONTRACTING, LLC  
Ref. Number: L22000023183

We have received your document for ALPERO GENERAL CONTRACTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 822A00004959

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

**FILED**

ALPERO GENERAL CONTRACTING LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2022 MAR 28 PM 6: 09

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 1/10/2022 and assigned  
Florida document number L22000023183

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)

5551 NW 112TH AVENUE

SUITE 115

DORAL, FL 33178

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5551 NW 112TH AVENUE

SUITE 115

DORAL, FL 33178

**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:

FLORIDA LEGAL & RETIREMENT PLAN EXPERTS LLC

New Registered Office Address:

603 SW 18 COURT

*Enter Florida street address*

CAPE CORAL

*City*

Florida 33991

*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.*

*[Signature]*  
**If Changing Registered Agent, Signature of New Registered Agent**

[illegible]

[illegible]

**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.

Dated JANUARY 27

**THOMAS TAPANES - REGISTERED AGENT**

**Filing Fee: \$25.00**