

L22 000082611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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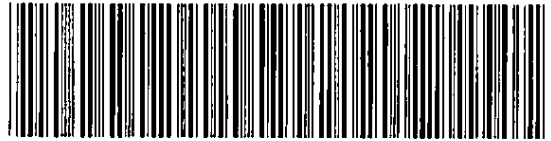
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

2024 AUG 29 AM 11:31

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MIDAS CONSTRUCTION GROUP, 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:

JORGE L MOLERO CORONEL

Name of Person

MIDAS CONSTRUCTION GROUP, LLC

Firm/Company

9301 SUMMIT CENTRE WAY APTD 1311

Address

ORLANDO, FL 32810

City/State and Zip Code

midasconstructiongroup3@gmail.com

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

For further information concerning this matter, please call:

JORGE L MOLERO CORONEL

407

2276332

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

2024 AUG 29 AM 11:32  
STATE  
TALLAHASSEE, FL



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

MIDAS CONSTRUCTION GROUP, 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 02/20/2022 and assigned  
Florida document number 1.22000082611.

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:

9301 SUMMIT CENTRE WAY APT0 1311

(Principal office address MUST BE A STREET ADDRESS)

ORLANDO, FL 32810

Enter new mailing address, if applicable:

9301 SUMMIT CENTRE WAY APT0 1311

(Mailing address MAY BE A POST OFFICE BOX)

ORLANDO, FL 32810

**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:

JORGE L MOLERO CORONEL

New Registered Office Address:

9301 SUMMIT CENTRE WAY APT0 1311

*Enter Florida street address*

ORLANDO

Florida

32810

*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.*

JORGE M.

15 Changing Registered Agent, Signature of New Registered Agent

2024 JUN 28 11:32  
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E. FL



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>
AMBR	JORGE L MOLERO CORONEL	9301 SUMMIT CENTRE WAY APTD 1311	<input type="checkbox"/> Add
		ORLANDO, FL 32810	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MARIANNY C BERMUDEZ TALAVERA	9301 SUMMIT CENTRE WAY APTD 1311	<input type="checkbox"/> Add
		ORLANDO, FL 32810	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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REC'D  
TALAVERA  
MAY 29 2011  
STATE  
FL



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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (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 \_\_\_\_\_ AUGUST 22 2024

Signature of a member or authorized representative of a member

JORGE L. MOLERO CORONEL

Typed or printed name of signee

2024 AUG 29 AM 11:32  
STATE  
TALLAHASSEE, FL

**Filing Fee: \$25.00**