L22000171543

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TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations MALDONADO BROTHERS CONCRETE "LLC" SUBJECT: 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: FREDIS D MALDONADO Name of Person MALDONADO BROTHERS CONCRETE "LLC" Firm/Company 29608 SW 158TH CT Address HOMESTEAD, FL 33033 City/State and Zip Code maldonadofredis25@gmail.com E-mail address: (to be used for future annual report notification) . For further information concerning this matter, please call: FREDIS D MALDONADO Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60,00 Filing Fee. S25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address:** Street Address: **Registration Section** Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

MALDONADO BROTHERS CONCRETE "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 w Florida document number L22000171543	ere filed on 04/11/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LI.C" or the al	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)		(~)
8. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:	-	P .:1
New Registered Office Address:	Enter Florida street address	3. 8
	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 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>	Type of Action
MGR	MALDONADO WILMER	29608 SW 158 Ct,	□Add
		Homestead FL 33033	Remove
			□ Change
			□Add
	•		□Remove
			Change
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ne date of filing: oust be specific and cannot block does not meet t	ot be prior to date he applicable s	of filing or more t	han 90 days after fili	ing.) Pursuant to 605,020
e record specifies a delayed effect rd is filed.	ive date, but not an e	ffective time, a	t 12:01 a.m. on tl	ne earlier of: (b)	The 90th day after the
October 4		22			
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