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Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	
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TILEU 2022 MAY 10 AM 10: 48

COVER LETTER

TO: Registration Section

Division of Cor	porations		
GALEANA SUBJECT:	CONSTRUCTION, LLC		e e e e e e e e e e e e e e e e e e e
SOURCE.	Name of Lin	nited Liability Company	 _
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	MIGUEL GALEANA AR	ANA	
		Name of Person	
	GALEANA CONSTRUC	FION, LLC	
		Firm/Company	
	905 MARLENE DRIVE		
		Address	
	OCOEE, FL 34761		
		City/State and Zip Code	
	globaltexto@yahoo.com	to be used for future annual report no	
For further information o	n-man address; (oncorning this matter, please o	•	uncation)
MIGUEL GALEANA ARANA		626 727-4462 au ()	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for th	ne following amount:		
☐ \$25.00 Filing Fee	S30.00 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		Street Address:	cotion
Registration S Division of C		Registration S Division of Co	
P.O. Box 632		The Centre of	·
Tallahassee, F	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

GALEANA CONSTRUCTION, LLC

2022 MAY 10 AM 10: 48

(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 $\frac{04/11/2022}{1}$ Florida document number L22000171785 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MGA GALEANA CONSTRUCTION, LLC 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address. Enter Florida street address

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany has been notified in writing of this change.

__. Florida ___

11 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>	Name	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Remove
			□ □ Change
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ote: If the date inserted in this	he date of filing: 05/05/2022 must be specific and cannot be prior to diblock does not meet the applicable Department of State's records.	late of filing or more than 90 c statutory filing requirem	(optional) days after filing.) Pursuant cents, this date will not b	to 605,020 be listed a
record specifies a delayed effectis filed.	tive date, but not an effective time,	at 12:01 a.m. on the earli	ier of: (b) The 90th day	y after the
MAY 5TH	2022			
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ited	Signature of a megher or authorize	aliana Greni	<u>a</u>	-