

122 000173485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

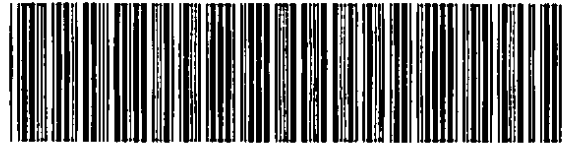
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2022 MAY 19 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **PRECISION DEMOLITION 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:

RAMON HERNANDEZ

Name of Person

PRECISION DEMOLITION LLC

Firm/Company

38142 9th Ave

Address

ZEPHYRHILLS, FL 33542

City/State and Zip Code

precisiondemo@hotmail.com

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

For further information concerning this matter, please call:

RAMON HERNNADEZ

813 2953592

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

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

FILED

2022 MAY 19 PM 4:07

PRECISION DEMOLITION LLC

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 4/11/22 and assigned
Florida document number L22000173485.

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)

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:

ARMANDO HERNANDEZ

New Registered Office Address:

38142 9TH AVE

Enter Florida street address

ZEPHYRHILLS

City

Florida 33542

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

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>
MGR	ARMANDO HERNANDEZ		<input type="checkbox"/> Add
		38142 9th Ave, Zephyrhills, FL 33542	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RAMON HERNANDEZ	38142 9th Ave, Zephyrhills, FL 33542	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FL

2022MAY 19 PM 4:07
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TALLAHASSEE, FL

ממלכת ישראל

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 May 10th, 2022

Karin Hernandez

Signature of a member or authorized representative of a member

Ramon Hernandez

Typed or printed name of signee

Filing Fee: \$25.00