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| (Req | uestor's Name) | |
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| (Add | ress) | |
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| (City) | /State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
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| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
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COVER LETTER

| Division of Co | • | | |
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| SUBJECT: 7/18 | | uction LLL | |
| | | ited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | Adalber | to Rosario | |
| | | Name of Person | |
| | Tiree Con | ustruction. | <i>L</i> んC |
| | | Firm/Company | |
| | 6291 | Powers Av | 12 |
| | | Address | |
| | Jackson | ile, FL 322 | .17 |
| | adal berto | (ile, FL 322 City/State and Zip Code (V0597, O@9) | nail.com |
| | E-mail address: (| to be used for future annual report notif | fication) |
| For further information | concerning this matter, please co | all: | |
| | | | 00 4 |
| Adalber | 6 Rosario | at (904) 502 Area Code Daytime | -8472 |
| Name | of Person | Area Code Daytime | c Telephone Number |
| Enclosed is a check for | the following amount: | | |
| □ \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |

TO:

Registration Section

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



TIREC CONSTRUCT

(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 $\frac{May 9,2622}{L220002/77.95}$ and assigned 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 "LLC." 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

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.

Cirv

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> | Type of Action |
|--------------|-------------------|--|----------------|
| MBR | Guido A. GONZALEZ | 12335 Stockbridge Ct: Jacksonville, FL 3225 | Sout Add |
| | | Jacksonville, FL 3225 | 8 □Remove |
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| If an e <u>Note:</u> | tive date, if other than the date of filing: | uant to 605. ot be liste | .0207 ed as |
| e reco | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th filed. | ı day after | r the |
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| ord is f | 15-JUNQ 2522 | | |
| ord is ! | 13-JONE 2522. | | |

Filing Fee: \$25.00