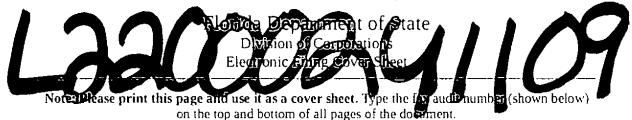
Fax: 8134365206

Division of Corporations



(((H23000400059 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* 🎉

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AVELAR INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

11/20/2023 08:12:49 PST

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To: 18506176383

Page: 2/4

From; Registered Agents Inc.

Fax: 8134365206

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Avelar Investments LLC	io ,			•
(Name of the Limited Liability (A Florida l	y Company as it now appears on our records.) Limited Liability Company)			
The Articles of Organization for this Limited Liability Co Florida document number <u>L22000241109</u>	ompany were filed on 05/24/22	<del></del>	and a	ssigned
riorida document number	<del>_</del> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company here:			
Avelar Engineering Group LLC				
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or	the abb	reviation "	L.L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRI	ESS)		·	
			-	
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
		V		
			:3 :3	
B. If amending the registered agent and/or registered	office address on our records, enter the	name	of thein	ew register
agent and/or the new registered office address here:				
			7	r_
Name of New Registered Agent:			<u> </u>	
		•	ؽ	
New Registered Office Address:			<del></del>	
New Registered Office Address:	Enter Florida street address		<del></del>	
New Registered Office Address:	Enter Florida street address . Floric	<del>-</del> la	<u></u>	

## 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.

11/20/2023 08:12.49 PST

To: 18506176383

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From: Registered Agents Inc.

Fex: 8134365206

## 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>	Address	Type of Action
		<del></del>	□Remove
			Change
	<del></del>		□ Add
			□Remove
			Change
			□Remove
			ПСняпде
			Fladd
			Remove
			Change
			□Add
			<u></u> Ш Remove
			Change
			□Add
			□ Renюve
			□Change

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 November 20	2023	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
Robin Jones		
	Typed or printed name of signee	

Filing Fee: \$25.00