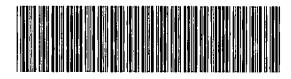
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		(Reque	estor's Name)	
		(Addre	ess)	<u>.</u>	
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		(City/S	state/Zip/Phor	ne #f)	
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Certified (Copies		Certificate	es of Status	
Special	Instruction	ns to Fili	ng Officer:		

Office Use Only





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COVER LETTER

TO:

TO: Registration Se Division of Cor			
CORREA . SUBJECT:	IR CONSTRUCTION LLC		
SUBJEAT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	NOE CORREA PEREZ		\$5. TAL
		Name of Person	2022 JUL 18 AM IO: 22
		Firm/Company	200 A
	120 N CHESTER ST		1 50.75 1 50.75 1 50.75
		Address	20 22 P
	LEESBURG, FL 34748		
	noelcorrea920@gmail.com	City/State and Zip Code	
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report not all:	fication)
NOEL CORREA PEREZ	Z	352 406-6844	
Name o	f Person		e Telephone Number
Enclosed is a check for the	he 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 Registration S Division of C	Section	<u>Street Address:</u> Registration Se Division of Co	
P.O. Box 632 Tallahassee, 1	27	The Centre of 7	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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ords, enter the name of the new registered
street address
Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
MGR	NOEL CORREA PEREZ	120 N CHESTER STREET LEESBURG, FL 34748	≡ Add
			□Remove
			□Change
	-		□Add
			□Remove
		TALLE.	Change Sm Call Add 1
			Remove P
		·	DAdd
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			□Cho

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Effective date, if other than the date of filing:	
Effective date, if other than the date of filing: [
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11 IN 15 25 2022	
Dated 2022	
Signature of a member or authorized representative of a member	

Filing Fee: \$25.00