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ration Section n of Corporatio	ons
D BEST CONST	TRUCTION
	Name of Limited Liability Company
nicles of Amend	Iment and fee(s) are submitted for filing.
correspondence	e concerning this matter to the following.
NA	ATHANAEL DIAZ
	Name of Person
	Firm Company
	Address
450	60 WEYMOUTH STREET, LAKEWORTH, FL 33463
TAI	City State and Zip Code INDIAZ7@GMAIL.COM
rmation concerni	E-mail address: (to be used for future annual report notification) ling this matter, please call:
	813 403-4056
Name of Person	n Area Code Daytime Telephone Number
eck for the follo	owing amount:
	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
tration Section	
ion of Corpora	rations Division of Corporations
Вох 6327 1assee, FL 32,	The Centre of Tallahassee 314 2415 N. Monroe Street, Suite 810
	ticles of Amendacorrespondence NA TA: TA: TA: Name of Person seek for the following Fee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

202 TAL SE

ND BEST CONSTRUCTION LLC		
(Name of the Limited Liah	ility Company as it now appears on our records. ida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number 1.22000270714	Company were filed on	Assigned 7: 32
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L Enter new principal offices address, if applicable:		or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET AD)	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<u></u>		rida
	City	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 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
\$	YASMYN HERNANDEZ	4560 WEYMOTH STREET,	€ Add
		LAKEWORTH, FL 33463	⊟Remove
			CChange
			Remove
			Change
			II Add
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			Remove
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Effective date, if other than the if an effective date is listed, the date mu Note: If the date inserted in this blocument's effective date on the D	lock does not meet t	the applicable			optional) after filing.) Per , this date will	suant to 605.02 not be listed
		ffective time,	at 12:01 a.m. o	in the earlier o	fi (b) - The प	th day after t
	re date, but not an e					
e record specifies a delayed effectived is filed. JUNE 20TH Dated		024				
rd is filed.		024				

Filing Fee: \$25.00