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TO: Registration Sec Division of Corp		,
	ONTRACTOR L	LC ·
SUBJECT:		Name of Limited Liability Company
The enclosed Articles of A	Amendment and f	ee(s) are submitted for filing.
Please return all correspor	idence concerning	g this matter to the following:
	MARK J LA I	FONTAINE, MST
		Name of Person
	FLORIDA TA	AX MAN, INC.
		Firm/Company
	2020 NE 51 ¢	COURT, APT 109
		Address
	FORT LAUD	ERDALE, FL 33308
	-	City/State and Zip Code
	MARK@FLT	AXMAN.COM nail address: (to be used for future annual report notification)
For further information co		
	Alcerning this mar	
Mark LaFontaine		954 903-8310 at ()
Name of	Person	Area Code Daytime Telephone Number
Enclosed is a check for the	e following amou	int:
■ \$25.00 Filing Fee	□ \$30.00 Filin Certificate	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		<u>Street Address:</u> 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

ARMOR CONTRACTORS LLC

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

The Articles of Organization for this Li	nited Liability Company were filed on	JUNE 15, 2022	and assigned
Florida document number L2200027377	1		

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:	JARED BEVIANO		
New Registered Office Address:	20571 LINKSVIEW WAY Enter Florida street address		
	BOCA RATON	. Florida ³³⁴³⁴	
	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, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Addre	<u>ss</u>	Type of Action
MGR	JARED BEVIANO	20571	LINKSVIEW WAY	⊡Add
		BOCA	RATON, FL 33434	□ Remove
				Change
AMBR	PAUL T CARTER	655 JE	FFERY STREET, UNIT 1	🗆 Add
		BOCA	RATON, FL 33487	🖬 Remove
				Change
				🗆 Add
		.		Change
				🗆 Add
				🗆 Remove
				Change
		. <u> </u>		🗆 Add
				🖸 Remove
				🗅 Change
				🗆 Add
				□Change

D. If amending any other informatio	n, enter change(s) here:	(Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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.

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 JULY 19	, 2022
Jalober	20
Sig	pature of a member or authorized representative of a member
JARED BEVIANO	
	Typed or printed name of signee