L22000363986

(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FI

COVER LETTER

	Registration Se Division of Cor			
SUBJEC	-	Construction LLC		
SUBJEC	· ·	Name of Lim	nited Linbility Company	
The enclo	sed Anicles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	um all correspo	ndence concerning this matter	to the following:	
		Haron C Rios		
			Name of Person	
		Haron C Rios / Haron Rios	s Construction LLC	
			Finn/Company	
		41 SW 5th St, Miami, FL 3	33130	
			Address	
		Miami, FL 33130		
			City/State and Zip Code	
		haronriosconstruction@gma		
			to be used for future annual report not	ification)
For furthe	r information c	oncerning this matter, please ca	all:	
Haron C I	Rios		786 7644801	
	Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed i	s a check for th	e following amount:		
\$25,00) Filing Fee	□ \$30.00 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 Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Flaron Rios Construction LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.22000363986	were filed on 08/18/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	nility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	941 Sw 5th St #1, Miami, FL 33130	
(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 agent and/or the new registered office address here:	941 SW 5th St #1, Miami, FL 33130 address on our records, enter the nam	SECRE ARK OF STREET
Name of New Registered Agent: New Registered Office Address:		
Then togistered office familess.	Enter Florida street address	
	, Florida	Zip Code
	Cily	ъф Сме

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
MGR	Haron C Rios	941 SW 5th St #1, Miami, FL 33130	□ Add
			□Remove
			■Change
			□Add
			□Remove
			□Change
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ffective date, if other than the can effective date is listed, the date must Note: If the date inserted in this blo locument's effective date on the De	ck does not meet the applicable	ate of filing or more than 90 c e statutory filing requirem	_ (optional) lays after filing.) Pursuant to 605.0207 (ents, this date will not be listed as t
record specifies a delayed effective d is filed.	date, but not an effective time,	at 12:01 a.m. on the earli	er of: (b) The 90th day after the
Pated September 27		Rios	·.
	Signatury of a member or authorize	ed representative of a mombe	n ——

F::: F: #85.00