Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000023414 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

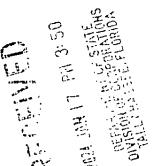
Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : I20070000159 Phone : (239)777-1028 Fax Number : (877)275-3593

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

SUPPORT@LICENSESETC.COM Email Address:_



LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CARLEE CONTRACTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	S25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

IAN 1 8 2024

TO:

Registration Section

(((H24000023414 3)))

COVER LETTER

porations						
CARLEE	CONTRACTING LLC					
Name of Lim	ited Liability Company					
Amendment and fee(s) are sub	emitted for filing.					
ndence concerning this matter	to the following:					
	TODD BABBITT					
	Name of Person					
	LICENSES, ETC., INC.					
Firm/Company						
27	911 CROWN LAKE BLVD					
Address						
BONI	TA SPRINGS, FL 34135					
	City/State and Zip Code					
	_					
E-mail addr e ss: (to be used for future annual report not	ification)				
oncerning this matter, please o	all:					
IABBITT	at (239) 777-1028	,				
Person	Area Code Daytin	ne Telephone Number				
e following amount:						
☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
si Section	<u>StreetAddress:</u> Registration Se	ection				
orporations	Division of Cor	Division of Corporations				
		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
	BONI SUPPE E-mail address: (concerning this matter, please of the following amount: S30.00 Filing Fee & Certificate of Status	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: TODD BABBITT Name of Person LICENSES, ETC., INC. Firm/Company 27911 CROWN LAKE BLVD Address BONITA SPRINGS, FL 34135 City/State and Zip Code SUPPORT@LICENSESETC.COM E-mail address: (to be used for future annual report not concerning this matter, please call: ABBITT at (239) 777-1028 Area Code Daytin Person Area Code Certificate of Status SireetAddress: E. StreetAddress: Registration Section Originations Division of Control of Cont				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000023414 3)))

ARTICLES OF ORGANIZATION
OF

CARLEE CONTRACTING LLC

(Name of the Limited Liability Company as it now annears on our records.)

If Changing Registered Agent, Signature of New Registered Agent

(A Florida Limited L	iability Company)		\$4. 3x
The Articles of Organization for this Limited Liability Company	were filed on	08/22/2022	and assigned
Florida document numberL22000368874			9
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company he	<u>re</u> :	
CARLEE CONSTRUCTION LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the de	esignation "LLC" or the abl	previation "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 a	ddress on our re	ecords, enter the name	e of the new registered
agent and/or the new registered office address here:		-	77
Name of New Registered Agent:			
New Registered Office Address:		 	
	Enter Flori	ida street address	
	City	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	· ,		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of . rovided for in C	my duties, and I am fo Chapter 605, F.S. Or,	amiliar with and if this document is

To: Sunbiz LLC Amendment

(((H24000023414 3)))

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> <u>Address</u> Type of Action \square Add ____ Change _____ Remove _____ 🔲 Add Remove __ □Change _____ □Remove _____ □Remove

__ Change

(((H24000023414 3)))

					
					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
				-	PX 4: 10
					•
					
				····	
					
					<u></u>
an effective of the state of th	ate, if other than the date of date is listed, the date must be speci- date inserted in this block does effective date on the Departmen	ic and cannot be prior to not meet the applica	ble statutory filing	requirements, this	iling.) Pursuant to 605.0207 (3
record spec Lis filed	rifies a delayed effective date, b	it not an effective tin	ne, at 12:01 a.m. o	n the earlier of (b)	The 90th day after the
	JANUARY 16TH	2024			
ated					
Pated		013/	×		