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COVER LETTER

Registration Section Division of Corporations TO:

SUBJECT:	ROYAL FL		STRUCTION SERVICES LLC- ited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	idence concerning this matter	to the following:	
		Ruben Alcaraz Brizuela		
			Name of Person	
			Firm/Company	
		1500 WEST BAY DRIVE	APT 120	
			Address	
		LARGO, FL 33770		
			City/State and Zip Code	
		betaandbetaconstruction@h		
		E-mail address: (to be used for future annual report not	ification)
For further in	iformation co	ncerning this matter, please co	all:	
Ruben Alcar	az Brizuela		804 290-3713	
	Name of	Person	at ()	ne Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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 Tallahassee, FL 32314

Street Address: 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

ROYAL FLUSH INVESTMENT & CONSTRUCTION SERVICES LLC

(<u>Name of the Lim</u>	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number $\frac{L22000411478}{L}$		/2022 and assigned	
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)	 	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	1 D 414		
B. If amending the registered agent and/or agent and/or the new registered office addre		cords, <u>enter the name of the new registere</u>	
Name of New Registered Agent:	Ruben Alcaraz Brizuela		
New Registered Office Address:			
New Negatiered Willie Hadiress.	Enter Floric	orida street address Florida	
		Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing			
I hereby accept the appointment as register provisions of all statutes relative to the propaccept the obligations of my position as regbeing filed to merely reflect a change in the company has been notified in writing of this	per and complete performance of n istered agent as provided for in Cl registered office address, I hereby change.	ny duties, and I am familiar with and appear 605. F.S. Or, if this document is	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Ruben Alcaraz Brizuela	1500 WEST BAY DRIVE APT 120	□Add
		LARGO, FL 33770	□Remove
			■ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
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