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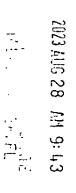
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COVER LETTER

Division of Cor	porations		
SUBJECT: AOM	Construction Name of Lim	& Cleaning, LLO	<u>C</u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Maria D	Name of Person	<u>.</u>
	AOM Constru	uction & Clean	ing LLC
	211 Dogwood	Address	
	Panama City	Bacich FL 32 City/State and Zip Code	2407
	Mariaosorio 28 E-mail address: (378 mo @ Gmail. O	ication)
For further information c	oncerning this matter, please ca	all:	
Maria Os	SON'O, Person	at (<u>850</u>) <u>532</u> Area Code Daytime	Company Compan
Enclosed is a check for the	ne 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)

.

TO:

Registration Section

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

2023 AUG 28 AH 9: 43 The Articles of Organization for this Limited Liability Company were filed on Florida document number L22000 414436 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 "LLC." 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_, Florida __

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 Title Name **Address Type of Action** Maria D. Osorio Cano 211 Dogovood St. Dadd

Panama Cty Beach Fl 32407 Memove _____ □Change ______ □Change _____ Change ____ □ Add

□Change

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cord sp s filed.		ed effective	date, but not	an effectiv	e time, at 12:0) I a.m. on the	e earlier of: (b)	The 90th day after t
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		- / 5	ignature of a	member or a	uthorized repre	sentative of a n	nember	

Filing Fee: \$25.00