

10/6/22, 10:27 AM

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L22 000421571

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : TAX ZONE INC.
 Account Number : I20190000044
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SECRETARY OF STATE
 TALLAHASSEE, FL

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

Email Address: accountant@taxzonefl.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 BLUE DIAMOND CONSTRUCTION SERVICES LLC**

| | |
|-----------------------|---------|
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H220003430413

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLUE DIAMOND CONSTRUCTION SERVICES LLC

 Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARQUEZ, SURGEYS

 Name of Person

 Firm/Company

P.O. BOX 421041

 Address

KISSIMMEE, FL 34741-1041

 City/State and Zip Code

ACCOUNTANT@TAXZONEFL.COM

 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

marquez, surgeons

407

888-3131

at ()

 Name of Person

Area Code

 Daytime Telephone Number

Enclosed is a check for the 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
 Tallahassee, FL 32314

Street Address:

Registration Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

H220003430413

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BLUE DIAMOND CONSTRUCTION SERVICES 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 Limited Liability Company were filed on 09/23/2022 and assigned
Florida document number L22000421571.

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.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)

P.O. BOX 421041

KISSIMMEE, FL 34741-1041

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 SECRETARY OF STATE
 TALLAHASSEE, FL
 FILED

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

Florida

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 Changing Registered Agent, Signature of New Registered Agent

[illegible]

Typed or printed name of signee