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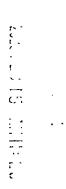
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dubiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Registration Section

Division of Cor	porations	•	
SUBJECT: <u>[AZ 1</u>	ALENA CUNSTRUC Name of Lim	TUN LLC ited Liability Company	±
	Amendment and fee(s) are sub		
	RUDWIN CA	Name of Person	-
		CONSTRUCTION L	1(
	5614 5th	AVENUE FUET MY	(15 3396 7
	FURT MYE	City/State and Zip Code	(15 33767
		to be used for future annual report notif	fication)
For further information c	oncerning this matter, please of	all:	
Name o	f Person	at ()	e Telephone Number
Enclosed is a check for th	ne following amount:		
☑ \$25.00 Filing Fee	(1) \$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 Addres Registration 9 Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARTAGENA (Name of the Limited Lia)	CONSTRUCTION bility Company as it now appears on	our records.)	
(A Flor	rida Limited Liability Company)	·,	
The Articles of Organization for this Limited Liability Florida document number L2200529	Company were filed on 121 1407	19 22 and assi	gned
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent:			
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and contain the words "I	.imited Liability Company," the design	nation "LLC" or the abbreviation "L.L	C."
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET AD	DRESS)		
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		<u>. </u>	
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(Mailing address MAY BE A POST OFFICE BOX)			
			1
B. If amending the registered agent and/or registe agent and/or the new registered office address here			registered
Name of New Registered Agent:			
New Registered Office Address:		<u>. </u>	
- -	Enter Florida :	street address	
	- 44	, 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 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	RUDUIN CARTAGENA	SCOLL 5th Avenue Fuel M	Ver ZAdd 7
			□Remove
			□Change
			□Add
			□Remove
			□Change
-			
			Remove
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ective date, if other the effective date is listed, the dee: If the date inserted in	this block does no	t meet the applica	to date of filing or able statutory fili	nore than 90 days at		
ument's effective date or	пистлеравинен 0	i state 8 fections.				
cord specifies a delayed e filed.	ffective date, but n	ot an effective tir	ne, at 12:01 a.m	on the earlier of:	(b) The 90	th day after th
ed 1/31/23	Q.					
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