(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	J. HOR	NE
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Please use funds from acct: 120210000160 AMOUNT: 25.00 1 m Full AUTHORIZATION: \_\_\_ Dominio Construction LLC **Business Name** Document # **Certified Copy** Certificate of Status **NEW FILINGS AMMENDMENTS** Profit Corp X Amendment Resignation Not for Profit \_\_Limited Liability Change of Registered Agent Revocation of DIssolution Domestication \_\_ \_Merger Other \_\_\_Conversion \_ CORP Amended and restated Articles LLLP Statement of Authority REGISTERATION/QUALIFICATIONS OTHER FILINGS \_\_\_\_ Foreign filing Annual Report \_\_Limited Partnership Reinstatement Fictitious Name Other \_\_\_ APOSTILLE Country

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

EXAMINIER'S INITIALS:\_\_\_\_

(850) 524-5437 (850) 524-6243

TALLAHASSEE, FL 32309

FLORIDA CAPITAL COURIER SERVICES. INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

EXAMINIER'S INITIALS:\_\_\_\_

Please use funds from acct: AUTHORIZATION:	120210000160 AMOUNT: 25.00   Document #
Certified Copy Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Corp Not for Profit Limited Liability Domestication Other CORP LLLP	X_AmendmentResignationChange of Registered AgentRevocation of DIssolutionMergerConversionAmended and restated ArticlesStatement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership Reinstatement
APOSTILLECountr	Other

## **COVER LETTER**

TO:

Registration Section

Division of Co	prporations		
	Construction LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	RODRIGUES, ELIZABE	тн	
		Name of Person	
	Dominio Construction LL	C	
		Firm/Company	
	6278 N FEDERAL HWY	#401	
		Address	
	FORT LAUDERDALE, F		
	christoeli@hotmail.com	City/State and Zip Code	
		to be used for future annual report not	tification)
For further information	concerning this matter, please c	all:	
CHOCHOS, NIKOLA	os	954 7621265 at ( )	
Name	of Person		ne 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 Addr Registration	Section	<u>Street Address:</u> Registration Se	
Division of P.O. Box 63	Corporations 27	Division of Co The Centre of	-
Tallahassee,			oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

12023 1815 1802

(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 01/03/2023 and assigned in L23000006257  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 Agent:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Florida  Zip Code	DOMINIO CONSTRUCTION LLC		LCG HAR III
Florida document number L23000006257  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  Florida	(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	3-3
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 Agent:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Florida		were filed on 01/03/2023	
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 address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	Florida document number <u>L23000006257</u> .		
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 affice address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	This amendment is submitted to amend the following:		;
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(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 , Florida	The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" or the	abbreviation "L.L.C."
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  Florida	Enter new principal offices 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  , Florida	(Principal office address MUST BE A STREET ADDRESS)	<del></del>	
(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  , Florida			
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Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	(Mailing address MAY BE A POST OFFICE BOX)		
New Registered Office Address:  Enter Florida street address , Florida		idress on our records, enter the na	me of the new registered
Enter Florida street address , Florida	Name of New Registered Agent:		
Enter Florida street address , Florida	New Registered Office Address		
	New Additional Office Additions.	Enter Florida street address	
City Zip Code			
New Desistered Agent's Signature, if changing Desistered Agents		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
MGRM ANTONOPOULOU, SOT	ANTONOPOULOU, SOTIRIA	6278 N FEDERAL HWY #401	
		FORT LAUDERDALE, FL 33308	□ Remove
			= Change
MGRM RODRIC	RODRIGUES, ELIZABETH	6278 N FEDERAL HWY #401	□ Add
		FORT LAUDERDALE, FL 33308	□ Remove
			<b>■</b> Change
MGR	VLAHAS, JOHN	6278 N FEDERAL HWY #401	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		FORT LAUDERDALE, FL 33308	□Remove
			□ Change
<del></del>			□Add
		<u> </u>	□ Remove
			☐ Change
		□Add	
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			Change
			□Add
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			☐ Change

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Note:	tive date, if other than the date of filing:
ne reco ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	C3/02/2023
	Signature of a member or authorized representative of a member