

L230000006257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

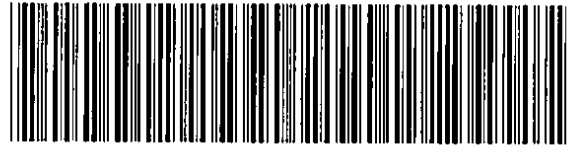
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 AUG 18 10:03

S. H. H. H. H.

AUG 18 2023



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2023 AUG 17 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 17, 2023

FLORIDA CAPITAL COURIER SERVICES

SUBJECT: DOMINIO CONSTRUCTION LLC
Ref. Number: L23000006257

We have received your document for DOMINIO CONSTRUCTION LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

Missing type of action to be taken on one of the authorized persons listed.

If you have any questions concerning the filing of your document, please call
(850) 245-6000.

STANTON H ROBERTS
Regulatory Specialist III

Letter Number: 323A00018965

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

Please use funds from this account: I20210000160 **\$25.00**

Authorization Signature: _____

DOMINIO CONSTRUCTION LLC

L23000006257

Business Name

Doc. #

___ **Certified Copy of**

___ **Certificate of Status**

NEW FILINGS

___ Profit Corp
___ Not for Profit
___ Officer/Director
___ Limited Liability
___ Domestication
___ Other
___ **CORP**
___ **LLLP**

AMENDMENTS

___ **X** Amendment
___ Resignation of R.A.

___ Change of Registered Agent
___ Revocation of Dissolution
___ Merger
___ **Conversion**
___ **Amended and restated Articles**
___ **Statement of Authority**

OTHER FILINGS

___ Annual Report

___ Fictitious Name

___ APOSTILLE

REGISTRATION/QUALIFICATIONS

___ Foreign filing
___ Limited Partnership
___ Reinstatement

___ Other

Country

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DOMINIO CONSTRUCTION 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:

ANTONOPoulos SOYIRIA
Name of Person

DOMINIO CONSTRUCTION LLC
Firm/Company

6278 N FEDERAL HWY #401
Address

FORT LAUDERDALE, FL 33308
City/State and Zip Code

info@dominioconstruction.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHOCHOS NIKOLAOS at (954) 762-7265
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

DOMINIO CONSTRUCTION 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 07/03/2023 and assigned 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 "L.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)

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

City

Florida

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

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>	<u>Address</u>	<u>Type of Action</u>
			<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	RODRIGUES, ELIZABETH	6278 N. FEDERAL HWY	<input type="checkbox"/> Add
		#401, FORT LAUDERDALE	<input checked="" type="checkbox"/> Remove
		FL, 33308	<input type="checkbox"/> Change
MGR	VLAKAS, JOHN	6278 N. FEDERAL HWY #401	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NIKOLAOS CHOCHOS	6278 N. FEDERAL HWY #401	
		FORT LAUDERDALE, FL	<input type="checkbox"/> Remove
		33308	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

antecessor

SOTIRIA ANTONOPOULOU

Typed or printed name of signee