

L230000006257

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

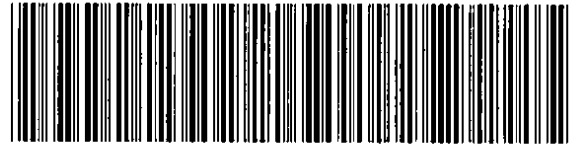
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



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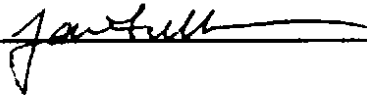
S. I. V. L. L. C.

AUG 21 2023

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

Please use funds from ACCT: I20210000160: \$25.00

Authorization Signature: \_\_\_\_\_



Dominio Construction LLC L23000006527

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

- \_\_\_ Amendment
- \_\_\_ Resignation of R.A.
- ☒ Change of Registered Agent
- \_\_\_ Revocation of Dissolution
- \_\_\_ Merger
- \_\_\_ Conversion
- \_\_\_ Amended and restated Articles
- \_\_\_ Statement of FACT

### 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:

ANTONPOULOU SOPHIA  
Name of Person

DOMINIO CONSTRUCTION LLC  
Firm/Company

6278 N. FEDERAL HWY # 401  
Address

FORT LAUDERDALE FL 33308  
City/State and Zip Code

info@dominiiconstruction.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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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 01/03/2023 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:** PLEASE REMOVE RODRIGUES ELIZA

Name of New Registered Agent:

ANTONIO PAVLOV SOTIRIA

New Registered Office Address:

6278 N FEDERAL HWY # 401

Enter Florida street address

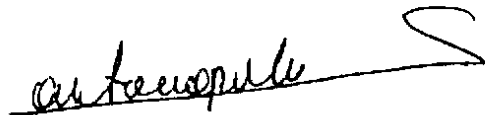
FORT LAUDERDALE, Florida 33308

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**

**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**

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ANTONOPoulos SOTIRIA MGR

CHOCHOS NIKOLAOS MGR

REMAIN THE SAME

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 08/18/2023, \_\_\_\_\_

Antonopoulos  
Signature of a member or authorized representative of a member

SOTIRIA ANTONOPoulos  
Typed or printed name of signer