L23000044993

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
<u> </u>	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE FEB 24 2023

Office Use Only



900402722719

2023 FEB 24 AM 8: 15
SECRETARISE LITTER

Ø

02/15/23--01012--025 **30.00

DIRECTOR'S DEFICE
DEFORMATIONS
DEFORMATIONS
DEFORMATIONS
DEFORMATIONS

PECEIVED

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

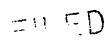
, Division of Cor	Porations Executing LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Barrick Bartolone		
		Name of Person	
	Bartolone Excavating LLC		
		Firm/Company	
	2560 4th Ave Ne		
		Address	
	Naples, FL 34120		
		City/State and Zip Code	
	bartoloneexcavating@outlo		
		to be used for future annual report no	otification)
For further information of	concerning this matter, please c	ail:	
Barrick Bartolone		239 989-5885 at ()	
Name o	of Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	Section
Division of C		Division of C	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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



=11 [] 2023 FEB 24 AM 8: 15

Bartolone Excavating LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(XT I MIGHT	mined timoling company)	LYTT	
The Articles of Organization for this Limited Liability Co Florida document number <u>L23000044993</u>	mpany were filed on 1-24-2	2023	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u>	ed liability company here	:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the design	gnation "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our reco	ords, <u>enter the name o</u>	f the new regist
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	ı strect address	
		Florida	Zip Code
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Barrick Bartolone	2560 4th Ave Ne Naples FL 34120	
			□Remove
			□ Change
AMBR	Lauren Bartolone	2560 4th Ave Ne Naples Fl 34120	
			□Remove
			□Change
			□ ∧ dd
			□Remove
			□Change
			D∧dd
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Changa

			<u></u>	
				
			<u> </u>	
-				
ective date, if other than the date of	filing:		(option	nal)
n effective date is listed, the date must be specifite: If the date inserted in this block does	ic and cannot be prior to		than 90 days after f	iling.) Pursuant to 605.0207
nument's effective date on the Department		ic statutory ming r	equirements, tins	uate will not be fisted as
cord specifies a delayed effective date, bu	nt not an effective time	e, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
s filed.				
Feburary 23rd ed	2023			
~	$\overline{\Omega}$. •		
Bure	Kh	11		
Signature	of a member or authoriz	zed representative of	a member	
Barrick Bartolone				