L23000055425

| (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: | |
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| | |

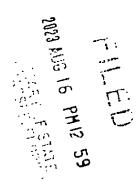
Office Use Only



600413599306

LLC Amend

08/16/23--01905--007 **25.00



A. RAMSEY SEP 122023

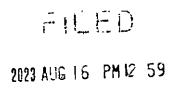
COVER LETTER

TO;

| TO: Registration So Division of Cor | | | |
|--|---|---|--|
| SUBJECT: Chief C | ornerstone Builders LLC | | |
| | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Marc Daniel Re | gistre | |
| | | Name of Person | |
| | | Firm/Company | |
| | 264 Cedar Pr | | |
| | | Address | |
| | Saint Augustin | | |
| | | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report noti | fication) |
| For further information c | oncerning this matter, please ca | afl: | |
| Marc Daniel Regi | stre | at (_718)552-72 | 207 |
| Name o | f Person | | e Telephone Number |
| Enclosed is a check for t | he following amount: | | |
| \$25.00 Filing Fee ■ \$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 Addres Registration | | <u>Street Address:</u> Registration Se | ction |
| Division of C | | Division of Cor | |
| P.O. Box 6327 | | The Centre of T | |
| Tallahassee Fl 32314 | | 2415 N. Monro | e Street Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Chief Cornerstone Builders LLC

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

| Florida document numberL23000055425 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: |
|--|
| 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 |
| · · · · · · · · · · · · · · · · · · · |
| 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 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, <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 |
|--------------|----------------------|---------------------------|----------------|
| | Marc Daniel Registre | 264 Cedar Preserve lane | □ ∧dd |
| | | Saint Augustine, FL 32095 | LI/Add |
| | | | ⊠Remove |
| | | | □ Change |
| | Christina Registre | 264 Cedar Preserve lane | |
| | | Saint Augustine, FL 32095 | |
| | | | ⊠Remove |
| | | | |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | Remove |
| | | | □Change |
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| | | | □Add |
| | | | □Remove |
| | | | □Change |

| Effective date, if other than the date of filing: | | |
|--|--|---|
| Effective date, if other than the date of filing:5/25/2023 | | |
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| Effective date, if other than the date of filing: | | |
| Effective date, if other than the date of filing: | | |
| f 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 d is filed. Dated 05/25/2023 | | |
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| NOTO | Dated 05/25/2023 | |
| Signature of a member or authorized representative of a member | | |
| | Signature of a member or authorized representa | ive of a member |
| Marc Daniel Registre | | |