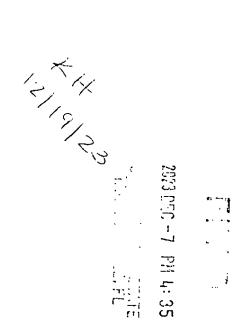
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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:
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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: May	ocaileo Boile	ders, LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Jose Mani	rel Portillo lope Name of Person	2
	Maracail	Do Bulders LLC Firm/Company	<del></del>
	2071 Dixie	Belle D, Apt B	<del>-</del>
	Orlando, F	City/State and Zip Code	<u></u>
	Josemonuel Por E-mail address: (1	tillolopez0615e ame	ail com
For further information con	ncerning this matter, please ca	ail:	. 63
Tose Manuel Parl Name of 1	illo Lapez Person	at ( <u>689</u> ) <u>307 (3</u> Area Code Daytime	Telephone Number : 1
Enclosed is a check for the	following amount:		PH -: 3
区\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Feet Cr Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Address:	ian
Registration Se Division of Co		Registration Sect Division of Corp	
P.O. Box 6327		The Centre of Ta	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Maracaibo	Builders LC Liability Company as it now appears on o	ur records.)
(A	Florida Limited Liability Company)	<del> </del>
		and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
in amendment is submitted to amend the following:  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."  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:  Italiang address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the new registered tent and/or the new registered office address here:  Name of New Registered Agent:		
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:	DV)	
initialing address SIAT BE A LOST OFFICE DO		
agent and/or the new registered office address.	<del>KIL</del> .	<u> </u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet address
		Florida
	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
MGR	Fradrico Ganzales	2071 Dixie Belle, Dr Apt B	□Add
		Orlando, FL 32812	EKemove
			□Change
MCR	Jose Manual BrtilbLopoz	2011 Dixie Belle, Dr Apt B	Œ⁄dd
		Orlando, FL 32812	□Remove
			□Change
	<del></del>		🗆 Add
			□Remove
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Effective date, if other than the date of filing:	) 1 7 01 g.) Pursuani to 605 e will not be liste	i i,0207 ed as
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Trd is filed.	he 90th day after	r the
Dated November 30 2023.		
Signature of a member or authorized representative of a member		
Signature of a member of authorized representative of a member		