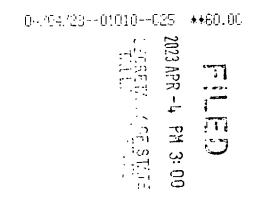
## L23000135159

-	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



200405916282



Y. SCOTT MAY 2 0 2023

## **COVER LETTER**

TO: Registration S Division of Co			,
	Construction Services, LLC.		
SUBJECT:	Name of Lim	ited Liability Company	
•			
•	of Amendment and fee(s) are sub	-	
Please return all corresp	pondence concerning this matter	to the following:	
	Vicente Rodriguez		
	<del></del>	Name of Person	
	Nietszche Construction Se	rvices, LLC	
		Firm/Company	2023 APR
	11765 S.W. 37th St.		F. A. P. R.
		Address	
	Miami, Florida 33175		अंति के
	garirodriguez@gmail.com	City/State and Zip Code	PM 3: 00
		to be used for future annual report notif	, ,
For further information	concerning this matter, please c	all:	
Ivette Gari Rodriguez		786 200-2880	
Name	of Person		: Telephone Number
Enclosed is a check for	the 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)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 327	Street Address: Registration Sec Division of Corp The Centre of Tore 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nietzche Construction Services, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our recu tability Company)	ords.)		
The Articles of Organization for this Limited Liability Company	were filed on 03/15/2023	and assigned		
lorida document number 1.23000135159				
This amendment is submitted to amend the following:				
L. If amending name, enter the new name of the limited liab	ility company here:			
Nietszche Construction Services, LLC				
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	.L.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	11765 S.W. 37th St	2023 7.023		
Principal office address MUST BE A STREET ADDRESS)	Miami, Florida 33175	PR T		
Enter new mailing address, if applicable:		15: O		
Mailing address MAY BE A POST OFFICE BOX)		- HE 00		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>en</u> t	ter the name of the new regist		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	<del></del>	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
		-	
			Remove  Company Change
			D Add C Remove
			□Change
			□Add
			□Remove
		<u> </u>	□ Change
			□Add
			Remove
<del></del>			□Add
			□Remove

				<del></del>			<del></del>
	<u>.</u>						
			· · · · · · · · · · · · · · · · · · ·				<del></del>
		<del></del>		· <del></del>			
				_			
	******						<del>_</del>
<del> </del>						<del></del>	
					=:C)	023 f	
		<del>-</del>	·· • • • • • • • • • • • • • • • • • •	·	<u> </u>	6PR	<del></del>
	<del></del>	<del></del>				+	1
						-0	] ] [
					T'S	ယ္	· Same
					[*	<del>-3</del> -	<del></del>
				<del></del> :			
		_					
				<u>-</u>			_
Tective date, if other than to affective date is listed, the date	the date of filing:	·		(or	otional)		405 0 <b>2</b> 0
n effective date is listed, the date te: If the date inserted in this	must be specific and o s block does not me	cannot be prior to d eet the applicable	late of filing or mo e statutory filing	ore than 90 days a grequirements,	iter filing.) Pu this date wil	rsuant to I not be	listed as
cument's effective date on the	e Department of Sta	ate's records.					
ecord specifies a delayed effectis filed.	ctive date, but not a	ın effective time	, at 12:01 a.m. o	n the earlier of:	(b) The 9	Oth day	after the
s med.							
		2023					
March 30			•				
ted March 30	<u></u>						

Typed or printed name of signee