L23000159021

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Stat	us
Special Instructions to Filing Officer:	
	1





300426518583

04/01/24--01004--003 *+25.00



2024 APR -1 AM 10: 25
SECKLIABY OF STATE
TALLAMASSEE, FL

COVER LETTER

er a v

TO: Registration S Division of Co		
AMS GEN	NERAL CONTRACTING, LLC	
SUBJECT:	Name of Lir	nited Liability Company
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.
	ondence concerning this matter	_
	Brian O'Connor	
		Name of Person
	AMS General Contracting	3
		Firm/Company
	2601 Cattlemen Rd., Ste.	104
		Address
	Sarasota, FL 34232	
	briano@ams-gc.com	City/State and Zip Code
		(to be used for future annual report notification)
For further information of	concerning this matter, please o	all:
Brian O'Connor	_	941 299-1665 at ()
Name o	of Person	Area Code Daytime Telephone Number
Enclosed is a check for t	he following amount:	
■ \$25.00 Filing Fee	☐ \$30.06 Filling Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Corporations C7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8107AIE Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMS GENERAL CONTRACTING, LLC

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

	(iones Emilios Ele	onity Company)	
The Articles of Organization for this Limited I	Liability Company w	rere filed on 4/5/2023	and assigned
Florida document number L23000159021	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liabili	ty 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 applic	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
	•		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
	_ 		
	•		
B. If amending the registered agent and/or i	registered office add	dress on our records, <u>e</u>	nter the name of the new registered
agent and/or the new registered office addre	ss here:		
Name of New Registered Agent:	Brian O'Connor		
Name of New Registered Agent:			
New Registered Office Address:	2601 Cattlemen R		
		Enter Florida street a	
	Sarasota	<u>.</u>	, Florida ³⁴²³² Zip Code
New Berlie		City	Zip Code
New Registered Agent's Signature, if changing I		·	
I hereby accept the appointment as registere	ed agent and agree	to act in this capacity.	I further agree to comply with the
provisions of all statutes relative to the prop	er and complete pe	rformance of my dutie	s. and I am familiar with and
accept the obligations of my position as regi- being filed to merely reflect a change in the	stered agent as pro registered office an	vided for in Chapter 6 drass I baraby confin	05, F.S. Or, if this document is
company has been notified in writing of this	change.	uress, Thereby conjur	Time 100 miles independently
	_	Δ . A	ALC: 4
		1/ N	APR T
	If Changin	g Registered Agent, Signate	ure of New Registered Agent
		-	mg A IV
			S

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	Minchuk, David	5920 Pan American Blvd.	□Add
		North Port, FL 34287	Remove
			□Change
MGR	Minchuk, Julia	5920 Pan American Blvd.	□Add
		North Port, FL 34287	≡ Remove
			□Change
AMBR	Furchak, Nick	2601 Cattlemen Rd., Ste. 104	= Add
		Sarasota, FL 34232	□Remove
			□Change
MGR	Brian O'Connor	2601 Cattlemen Rd., Stc. 104	= Add
		Sarasota, FL 34232	□Remove
			□Change
			□Add
		יי ר	200 APROLATE OF STATE
		·	□Change

· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	_	
 -		
ffective date, if other than the date of filing:	(ontional)	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable state occument's effective date on the Department of State's records.	f filing or more than 90 days after filing.) tutory filing requirements, this date w	Pursuant to 605.020 vill not be listed a
record specifies a delayed effective date, but not an effective time, at it is filed.	2:01 a.m. on the earlier of: (b) The	90th day after the
March 30 Mm 2024	17.	2024 SEC
ated Ma-ch 20 m 2024		1024 APR - Secreta
K-MA	AH,	
Signature of a member or authorized re		
Brian M.	O Connor E	OF ST/

Filing Fee: \$25.00