

## L23000194019

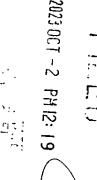
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## **COVER LETTER**

TO:

то:	Registration Sec Division of Corp			
C1111 1F		HOLDINGS LLC		1
SUBJE	C1:	Name of Limit	ted Liability Company	
The end	closed Articles of A	amendment and fee(s) are subr	mitted for filing.	
Please	eturn all correspon	dence concerning this matter t	to the following:	
		HUMBERTO COLLAZO		
			Name of Person	
		COLOSSUS HOLDINGS I	LLC	
			Firm/Company	
		1238 E KENNEDY BLVD	UNIT 1003	
			Address	·
		TAMPA FL 33602		
			City/State and Zip Code	
		HC@COLOSSUSHOLDIN	GSUS.COM to be used for future annual report notif	ication)
For fur	ther information or	oncerning this matter, please or		
		-		
HUMI	BERTO COLLAZO		at ( )	2 Telephone Number
	Name of	Person	Area Code Daytime	e Telephone Number
Enclos	ed is a check for th	e following amount:		
□ \$2	5.00 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 S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Seconds Division of Core The Centre of Tallahassee, FL	porations fallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLOSSUS HOLDINGS LLC	
( <u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company we	ere filed on 04/19/2023 and assigned
Florida document number L23000194019	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ty company here:
COLOSSUS CONTRACTING GROUP LLC	
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 applicable:	
Principal office address MUST BE A STREET ADDRESS)	202
	· · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	2
Mailing address MAY BE A POST OFFICE BOX)	
maning address MITT DE TITOUT OF THE BOTY	2.24
	0
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, <u>enter the name of the new regis</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street 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
			□Remove
·····			□Add
			□ Remove
			☐ Change
			□Add
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Effective date, if other than	the date of filing:	(opti	enal)
(If an effective date is listed, the date Note: If the date inserted in the	e must be specific and cannot be prior	to date of filing or more than 90 days after able statutory filing requirements, thi	filing.) Pursuant to 605.0207 (3)
he record specifies a delayed efford is filed.	ective date, but not an effective ti	me, at 12:01 a.m. on the earlier of: (b	The 90th day after the
Dated September 25	2023		
		×1/_	

Typed or printed name of signee