L23000347320

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COVER LETTER

TO: Registration So Division of Cor			
	CONSTRUCTION OF APO	PKA LLC	
SUBJECT:		_	
	Name of Lin	nited 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:	
	WALFRE H LOPEZ PER	REZ	
		Name of Person	
		Firm/Company	-
	735 ROLLING GREEN I	• •	350
		Address	
	APOPKA, FL 32703		122
	DSPARKBUSINESS@GI	City/State and Zip Code MAIL.COM	ORG 1411: 23
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
WALFRE H. LOPEZ P	EREZ	407 669-2090	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration S		Registration Sec	
Division of C P.O. Box 632		Division of Cor	•
T.O. BOX 052		The Centre of T	allanassee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GENERAL CONSTRUCTION OF APOPKALLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number _______L23000347320 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PEREZ REMODELING AND GENERAL CONSTRUCTION IN APOPKA LLC 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 City 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
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			□Remove
			□Change
			□ Add
			□Remove
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te: If the date inserted in this bloc	k does not meet the applicable statutory fil	ling requirements, this date will not be listed
cument's effective date on the Dep	artinem of state's records.	
ecord specifies a delayed effective is filed.	late, but not an effective time, at 12:01 a.m	n, on the earlier of: (b) The 90th day after
JANUARY, 16	2024	
ted		
	,	
WALFRE H. LOPEZ	PEREZ ignature of a member or authorized representati	