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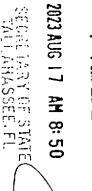
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer.
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COVER LETTER

TO:

Registration Section

Divi	sion of Corp	porations	•	
OUBLECT.	Southeast 6	Construction Supply, LLC		
SUBJECT:		Name of Limite	d Liability Company	
The enclosed	Articles of	Amendment and fee(s) are submi	itted the filing	
			-	
Please return	all correspon	ndence concerning this matter to	the following:	
		Gene Frost		
			Name of Person	
		Southeast Construction Supp	ly, LLC	
			Firm/Company	
		119 Hollywood Blvd NW - S	uite 207	
			Address	
		Ft Walton Beach, FL 32548		
			City/State and Zip Code	
		gene@southeastconstructionst	upply.com	
For further in Gene Frost	formation co	oncerning this matter, please call	615 218-4682	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling Fee	☐ \$30.90 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)
Reg Div P.O	Box 632	section orporations 7	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations Hahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	_ and a	ssigned
the abbre	viation "	L.L.C."
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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
AMBR	Elisbet Hurtado	311 Beal Pkwy, Ft Walton Beach, FL 32548	■ Add
			□Remove
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			Chara

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ffective date, if other than the	date of filing:		(optional)
an effective date is listed, the date mu	st be specific and cannot be pric		n 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this bis comment's effective date on the D			irements, this date will not be listed a
genment's effective date on the D	cyartificia or state 3 record		
record specifies a delayed effectiv Lis filed.	ve date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The 90th day after the
August 10	2023	1	
ated	,		
	11		
	·/ /// //		

Typed or printed name of signee