## L23000404445

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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #	f)
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Certified Copies	Certificates o	f Status
<u>,</u>		
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

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elib lezn	Raxi <sup>*</sup> Constr	ruction LLC		
SUBJECT	1: <u></u>	Name of Lim	ited Liability Company	2023 < 5.77
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	?;; 25 25
Please reti	ırn all correspo	ndence concerning this matter	to the following:	3
		Rafael Lopez Manjarres		ලා යා
			Name of Person	
		<del> </del>	Firm/Company	
		5001 SW 20th St Apt 8102		
			Address	
		Ocala FL 34474		
			City/State and Zip Code	
		raxiconstruction@gmail.cor	n to be used for future annual report not	(traction)
For further	r information co	oncerning this matter, please ea	·	incation)
Esmirna C	Caraballo/Accou	intant	352 216-3106	
	Name of	f Person	Area Code Daytin	ne Telephone Number
Enclosed i	s a check for th	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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 5.7. 5

Roxi Construction LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) ÇĢ The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned Florida document number L23000404445 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Raxi Construction 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) 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 \_, Florida \_\_\_ Cire

## 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
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			□Remove
		<del></del>	□Change
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			25 ⊡Remove ⊅•
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We are amending the Name of the company. It was misspell	ica. Its supposed to be ICAM Hot ICOM.
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fective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicable cument's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time is filed.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ted September 21 2023	.•
N.F.	
Signature of a member or authoriz	zed representative of a member

Filing Fee: \$25.00