Electronic Filing Cover Sheet

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(((H23000347144 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : IDEAS CARVADAL ELC

Account Number : I20220000005 Phone : (321)333-5565

Fax Number : (407)565-5637

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONSTRUCTORA SEVILLA LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu



COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT.	CONSTRUCT	TORA SEVILLA LLC	
SUBJECT:	Name of L!m	Ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filling.	
Please return all correspo	endence concerning this matter	to the following:	
		MEJIA CARLOS F	
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	COI	NSTRUCTORA SEVILLA LLC	· 20
		Firm/Company	23 OC
		11403 CITRA CIRCLE	
		Address	>:_ 3
		WINDERMERE, FL 34786	2023 OCT - 3 PM 4: 37
		City/State and Zip Code	<u> </u>
	RCTA	XSERVICEWO@GMAIL.COM	4
		to be used for future annual report notification)	
For further information c	oncerning this matter, please c	ali:	
CARLOS	S F MEJIA	689-278-9	
Name o	f Person	Area Code Daytime Telephon	e Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	S30,00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Malling Addre</u> Registration		Street Address; Registration Section	
Division of C	Corporations	Division of Corporation	
P.O. Box 632 Tallahassee,		The Centre of Tallahass 2415 N. Monroe Street,	
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Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONSTRUCTOR	RA SEVILLA LLC		17) L. (
(Name of the Limited Liability Com (A Florida Limite	ideny as it now appears id Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability Comparing L23000452104 This amendment is submitted to amend the following:	ny were filed on	09-29-2023	-3 Passigned		
A. If amending name, enter the new name of the limited li	ability company her	<u>e</u> ;			
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the des	ignation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)	11403 CI	TRA CIRCLE BUIL	DING 6 APT 304		
	<u></u>	/INDERMERE FL, :	34786		
Enter new mailing address, if applicable:			 		
(Malling address MAY BE A POST OFFICE BOX)	11403 CI	11403 CITRA CIRCLE BUILDING 6 APT 304			
	WINDERMERE FL, 34786				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our red	cords, <u>enter the na</u>	me of the new register		
Name of New Registered Agent:	CAR	LOS F MEJIA			
New Registered Office Address:	11403 CITRA CI	RCLE BUILDING 6			
	Enter Florid	da street address			
	WINDERMERE	, Florida	34786		
	Cliy		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 nerson, being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	CARLOS F MEJIA	11403 CITRA CIRCLE BUILDING 6 APT 304	©Add
		WINDERMERE FL, 34786	©Remove
AMBR	JHONATAN TAMAYO	11403 CITRA CIRCLE BUILDING 6 APT 304)23
		WINDERMERE FL, 34786	- 3Remove
			Ethange
			□ Add □ Remove
			Change
			🗆 Add
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			□Remove
			🗆 Change
			🗀 Add
			□ Remove
			□Change

Effective date, if other than the date of filling: (optional) For effective date, if other than the date of filling: (optional) For effective date is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filling.) Pursuant to 603.0207. Notice if the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as a document's effective date on the Department of State's records. The effective date of the date, but not an effective since, at 12:01 a.m. on the earlier of: (b) The 90th day after the right of the filling. OCTOBER 03 2023 Signature of a member or authorized repressivative of a member.					<u> </u>	 	
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Filing Fee: \$25.00