L 23 000 419 187

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TD: Registration Se Division of Cor			
	TRUCTION, 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:	
	PENA SEGUI, IOSVANY	(
		Name of Person	_
	PSP CONSTRUCTION, I	LC	
		Firm/Company	_
	2268 W NEW HAVEN A	VE	
		Address	_
	MELBOURNE, FL 32904		
	penayosbani89@gmail.com	City/State and Zip Code	_
		(to be used for future annual report notification)	
For further information c	oncerning this matter, please c	all:	
PENA SEGUI, IOSVAN	ΙΥ	786 3108296 at ()	
Name o	f Person	Area Code Daytime Telephone Number	er
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fce	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
1			
Mailing Address Registration S Division of C P.O. Box 632	Section forporations /	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Tallahassee, I	' '	2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

2023 //07/17 /// 10: 50

		1.110.00
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) imited Liability Company)	-
The Articles of Organization for this Limited Liability Com- Florida document number L23000479187	npany were filed on 10/18/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d 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 ADDRES	<u>SS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
agent and/or the new registered office address here:	office address on our records, <u>enter th</u>	e name of the new registere
	office address on our records, <u>enter the</u>	ne name of the new registere
agent and/or the new registered office address here:	Enter Florida street address	ne name of the new registere

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	PENA SEGUI, IOSVANY	2268 W NEW HAVEN AVE	≣ Add
		MELBOURNE, FL 32904	□Remove
			□Add
			Remove
			Change
			□Add
			□Remove
			🗆 Add
		- <u>-</u>	□Remove
			□Remove
		□Change	
			□Add
			□Remove
			□ Change

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
*	
	
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[If an effecti Note: If t	date, if other than the date of filing:
e record sp rd is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	November 15th, 2023.
	November 15th, 2023. Signature of a member or authorized representative of a member
	Tosyan / Tona Segul Typed or printed name of signee