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Office Use Only



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COVER LETTER

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TO:	Registration Se Division of Cor		٠	٧	
0.10.11		. AMERICAN CONSTRUCT	ION LLC		
SUBJI	EC1:	Name of Lim	of Limited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		CHRISTOPHER SIERRA			
			Name of Person		
			Firm/Company		
		6036 SW 13th Ter			
			Address		
	MIAMI, FL 33144 City/State and Zip Code				
		jpnorkgroup@yahoo.com			
			to be used for future annual report not	incation)	
For fu	rther information o	oncerning this matter, please c	all:		
Jean F	aul Urquizo		786 369-6335 at ()		
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclos	sed is a check for th	ne following amount:			
□ \$ 2	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 Registration S	Section	Street Address: Registration Se		
	Division of C P.O. Box 632	-	Division of Co The Centre of		
	Tallahassee, I			be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIRST ALL AMERICAN CONSTRUCT		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our record rida Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability	Company were filed on 01/17/2024	and assigned
lorida document number L24000034737		
his amendment is submitted to amend the following	:	
. If amending name, enter the new name of the l	imited liability company here:	
		24
he new name must be distinguishable and contain the words "I	limited Liability Company," the designation "LLC	" or the abbreviation
nter new principal offices address, if applicable:		- 100 b F
Principal office address MUST BE A STREET AD	DRESS)	30
		警 8
nter new mailing address, if applicable:		3.5
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registe		the name of the new registe
gent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	is .
<u>-</u> -		orida
	City	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 person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Evgeniya Ignatushchenko	240 N Miami Ave #2615 Miami FL 33128	
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Change
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			🗆 Add
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			Change
			□ Add
			□Remove
			□Change

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(If an effecti Note: If t	date, if other than the date of filing: (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
e record spord 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	ay 3 2024
	(0/2 /)
	Signature of a member or authorized representative of a member
	Oscar Seelen Polo Typed or printed name of signee

Filing Fee: \$25.00