## L24000075497

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## COVER LETTER

TO: Registration Section

Division of Co	rporations 5	, <del>*</del>	te 💉			
PRO-FORO	CE'CONTRACTORS LLC	*	ų			
DBJECT:	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:				
	JOHN A QUINTANA					
		Name of Person				
	PRO-FORCE CONTRAC	TORS LLC				
	Firm/Company					
	8421 NW 172ND ST					
	Address					
	HIALEAH FL 33015					
		City/State and Zip Code				
	JOQUINTANA20@GMAI					
For further information of	e-mail address: ( concerning this matter, please c	to be used for future annual report n	ouncation)			
	oncerning this matter, piease e					
JOHN A QUINTANA		786 247-8300 at ()				
Name c	n' Person	Area Code Dayt	time Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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		Street Address: Registration S				
Division of Corporations		Division of C				
P.O. Box 6327		The Centre of	f Tallahassee			
Tallahassee FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRO-FORCE CONTRACTORS LLC		
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on FEBRUARY 12, 2024	and assigned
lorida document number 1.24000075497		_
his amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "L	Limited Liability Company," the designation "LLC" or the al	obreviation "L.L.C."—
Enter new principal offices address, if applicable:		·
Principal office address MUST BE A STREET AD		
		•
	-	·
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or register agent and/or the new registered office address here		ne of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	Citv	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

itle	<u>Name</u>	Address	Type of Action
AMBR	LIZ ARLET TRAVIESO	9213 NW 121 STREET	■Add
		HIALEAH GARDENS, FL 33018	□Remove
			□Change
			□Add
			□Remove
		Change	
<del></del>		<del></del>	□Adđ
	· <del></del>	□Remove	
		□Change	
			□Add
		Remove	
			Change
			□Add
		Remove	
			☐ Change
			🗆 Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_\_\_\_ (optional)

(If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated \_ APRIL 10th 2024 Signature of a member or authorized representative of a member JOHN A QUINTANA

Typed or printed name of signee