

L24000076541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

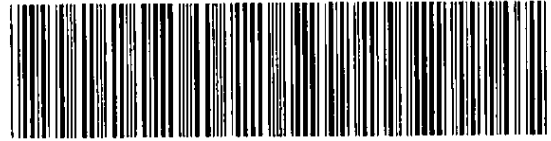
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800436737818

09/18/24--01013--004 \*\*30.00

FILED  
2024 SEP 18 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: CONTRACTORS ON DEMAND LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUBENS DESOUZA

Name of Person

CONTRACTORS ON DEMAND LLC

Firm/Company

2708 SANTA BARBARA BLVD STE. 120

Address

CAPE CORAL FLORIDA 33914

City/State and Zip Code

DRUBENS247@GMAIL.COM

E-mail address: (to be used for future annual report notification)

2024 SEP 18 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

For further information concerning this matter, please call:

RUBENS DESOUZA

954 330-1473  
at ( )  
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the 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

**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**

CONTRACTORS ON DEMAND LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/12/2024 and assigned  
Florida document number L-24000076541.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

CONTRACTORS ON DEMAND 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)**

2708 SANTA BARBARA BLVD STE. 120

CAPE CORAL, FLORIDA 33914

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2708 SANTA BARBARA BLVD SUITE #120

CAPE CORAL FL 33914

**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:

LUCAS VILLELA SOUZA ALHO

New Registered Office Address:

750 NE 140TH ST

*Enter Florida street address*

NORTH MIAMI

, Florida 33161

*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 Changing Registered Agent, Signature of New Registered Agent**

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>	<u>Address</u>	<u>Type of Action</u>
MGR	LUCAS VILLELA ALHO	750 NE 140TH ST N. MIAMI FL 33161	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	WELL DONE CONSTRUCTION I		<input type="checkbox"/> Add
		2117 OPA-LOCKA BLVD OPA-LOCKA MIAMI FL	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 SEP 16 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FL

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ADD LUCAS VILLELA SOUZA ALMO

REMOVE: WELDON CONSTRUCTION LLC

CHANGE THE MAILING ADDRESS  
FROM OPA-20CKA TO  
2708 SANTA BARBARA BLVD  
CAPE CORAL FL 33914

2024 SEP 18 PM 2:36  
SECRETARY OF  
TALLAHASSEE

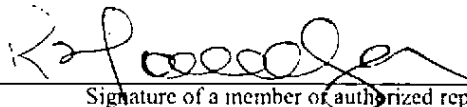
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 SEPTEMBER, 10, 2024



Signature of a member or authorized representative of a member

RUBENS DESOUZA

Typed or printed name of signee