## L24000078484

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Office Use Only



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## **COVER LETTER**

TO: Registration So Division of Cou			
	REGO 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:	
	YEILY CRUZ ABREGO		
		Name of Person	· · · · · ·
	CRUZ ABREGO LLC		
		Firm/Company	
	4725 BRYAN AVE		
	· <b></b>	Address	
	BOWLING GREEN, FL	33834	
	*****	City/State and Zip Code	
	TESSA@GITS.BIZ		
For further information c	oncerning this matter, please c	to be used for future annual report no all:	ntrication)
YEILY CRUZ ABREGO	)	863 245-7552	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration	Section	Street Address: Registration S	
Division of C P.O. Box 632		Division of Co The Centre of	
Tallahassee,			oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRUZ ABREGO LLC		
( <u>Name of the Limited Liability (</u> A Florida Li	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number <u>L24000078484</u> .	npany were filed on 2/13/2024	and assigned
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	d liability company here:	
RUZ ABREGO CONSTRUCTION & FRAMING LLC		
he new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	(22	
incipal office address MOST DE A STREET ADDRES	<del></del>	F 1
	<del></del>	· -
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		•
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		1
B. If amending the registered agent and/or registered of gent and/or the new registered office address here:	ffice address on our records, <u>enter th</u>	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u></u>
	ones I fortad street dudress	
<del>,</del>	, Florid	da
	[ IIV,	(in 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:

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
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Effective date, if other than the data If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be prio k does not meet the appli	or to date of filing or more to cable statutory filing re		
ne record specifies a delayed effective dord is filed.	late, but not an effective	time, at 12:01 a.m. on t	he earlier of: (b) The 90th da	y after the
Dated	. 2024	·		
Yeily Cont-Abo	1.48	horized representative of	manihar	_
Yeily Cruz-Abr	4.48 gnature of a member or auti	horized representative of a	member	

Filing Fee: \$25.00