

L24000143675

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COVER LETTER

FO: Registration Sec Division of Corp			
SUBJECT:H	PG Construct Name of Limi	ted Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Henry G	Name of Person	
		Firm/Company	
	6222 Yorkt	Address	
	Orlando - F	10vida 32807 City/State and Zip Code	
		De hot mail. com to be used for future annual report notif	
For further information co	oncerning this matter, please ca	ill:	
Henry Gor Name of	Person	at (689) 269 Area Code Daytime	O805 e Telephone Number
Enclosed is a check for th	e 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

HPG (onstruction	Company of it now appears on a	ur records)	
(A Florida	y Company as it now appears on o Limited Liability Company)	i <u>ui recorus.</u>)	
The Articles of Organization for this Limited Liability Co	ompany were filed on		and assigned
Florida document number <u>L 24 00014 31 7 5</u>	_·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designa	ation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	ESS)		
		<u>.</u>	024
		•	[E]:1
Enter new mailing address, if applicable:		_ ; _	٠ ا
Mailing address MAY BE A POST OFFICE BOX)	 	.,,	P:
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	·		တ္
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our record	ls, <u>enter the name</u>	of the new register
Name of New Registered Agent:			
New Registered Office Address:			
-	Enter Florida sti	reet address	
		, Florida	7: ()
	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>	Address	Type of Action
MGF	Henry Guerrero	G222 Yerktown Dr. Orland, Fl 32807	≧ ¶Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
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(optional) 0 days after filing.) Pursuant to 605.0207 ements, this date will not be listed as
arlier of: (b) The 90th day after the
nber
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