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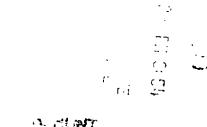
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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C8/23/24

COVER LETTER

TO:

TO: Registration S Division of Co			
	rground Construction LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alphonso Brown		
		Name of Person	- ,
	SOP Underground Constn.	action LLC	
		Firm/Company	
	5705 NW 109th Ave Unit	48	· · · · · · · · · · · · · · · · · · ·
		Address	· · ·
	Doral, FL 33178		c co
		City/State and Zip Code	
	abrown@someonepro.com		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report noti	fication)
Alphonso Brown	concerning and matter, prease c	305 498-2587	
	<u> </u>	at ()	- T-1-1
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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 Addre		Street Address:	
Registration Division of 0		Registration Se Division of Cor	
P.O. Box 632	-	The Centre of T	•
Tallahassee,			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOP Underground Construction LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 4/9/24	_ and assigned
orida document number <u>L24000168568</u>		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
ne new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbre	eviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		-:,
Aailing address MAY BE A POST OFFICE BOX)		() 57'
		(1
If amending the registered agent and/or registered office ent and/or the new registered office address here:	address on our records, enter the name o	of the new regis
Name of New Registered Agent:		-
New Registered Office Address:	From Florida, and I	
	Enter Florida street address	
	, Florida	
	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
SVP	David Presmanes III	21313 SW 147TH AVE	
		MIAML FL 33187	≡ Remove
			□ Change
			□Add
			□Remove
			☐ Change
			CChange
			□Change
			□Remove
			□Change
			🗖 Add
			□Remove
			□Change

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ctive date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date of filing one of the file of the file of the date inserted in this block does not meet the applicable statutory file.	or more than 90 days after filing.) Pursuant to 605.03
ment's effective date on the Department of State's records.	
	d Cala III Ood to Acad
ord specifies a delayed effective date, but not an effective time, at 12:01 a.; filed.	m. on the earlier of: (b) I he 90th day after the
d August 21 2024	
No Am	

Typed or printed name of signee