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(Business Entity Name)	
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COVER LETTER

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TO:

	gistration S vision of Co				
CIID IECT.	Rock	Solid	Concrete	Construction,	LLC
SUBJECT:			Name of Limi	ited Liability Company	
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ፓኤ 1	d 4	Γ A 1	16 ()	to the left	
The enclose	a Articles of	Amendment	and fee(s) are sub	mitted for filing.	
Please return	n all corresp	ondence conce	erning this matter	to the following:	
		Brac	lley Birk	Name of Person COncrete Constru Firm/Company	
				Name of Person	
		Roch	r Solid	Concrete Constru	ichon, LLC
				Firm/Company	
		290	O Cline S	Address	
				Address	
		Tall	ahacsee E	37309	
		1011	WHUSSEC , F	City/State and Zip Code	
		la sad	hairlen eine	City/State and Zip Code	
		Drau	E-mail address: (1	o be used for future annual report noti	fication)
For further i	information (s matter, please ca		,
_	_				
Bradi	ly bir	Kmelle	, 	at (<u>950)</u> 354 - Area Code Daytim	3594
	Name	of Person		Area Code Daytim	e Telephone Number
Enclosed is	a check for (the following a	amount:		
☆ \$25.00	Filing Fee		Filing Fee & icate 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)
	iling Addre			Street Address:	
	gistration		_	Registration Se	
	vision of C O. Box 63:	Corporation: 27	5	Division of Cor The Centre of T	
		FL 32314			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rock Solid Concret	re Construction, L	.u(
(Name of the Limited Lia (A Flo	bility Company as it now appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability	y Company were filed on 05/	
This amendment is submitted to amend the following	Ç.	
A. If amending name, enter the new name of the l		
Paradian Construction S The new name must be distinguishable and contain the words "	services, LLC	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		****
Principal office address MUST BE A STREET AD	DRESS)	1
Enter new mailing address, if applicable:	_	;
(Mailing address MAY BE A POST OFFICE BOX)		
		r o
	- ·	
B. If amending the registered agent and/or registe agent and/or the new registered office address her		ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet 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

Title	<u>Name</u>	Address	Type of Action
			🗀 Add
			□Remove
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ective date, if other than effective date is listed, the date te: If the date inserted in the ument's effective date on the	te must be specific and c his block does not me	annot be prior to date et the applicable s	of filing or more than 90 atutory filing requirem	(optional) days after filing.) I ents, this date w	Pursuant to 605.020 Fill not be listed a
cord specifies a delayed effor s filed.					90th day after the
ed October 3 Bradley F	rd,	2024.			
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BBir	kmell				

Filing Fee: \$25.00