

L24000230857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

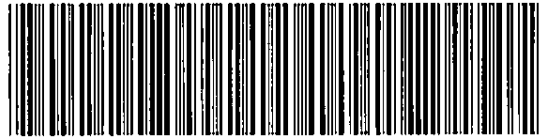
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TALLAHASSEE, FL  
FLORIDA

*Mc*

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **FB CONTRACTORS OF FLORIDA 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:

**FRANCO ANDRE BERETA JR**

\_\_\_\_\_  
Name of Person

**FB CONTRACTORS OF FLORIDA LLC**

\_\_\_\_\_  
Firm/Company

**738 W SAND LAKE RD SUITE 500**

\_\_\_\_\_  
Address

**ORLANDO, FL 32819**

\_\_\_\_\_  
City/State and Zip Code

**CONTATO@BT7PARTNERS.COM**

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

**LUIS G. B. GONCALVES**

**407 371-5600**

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

Daytime Telephone Number

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**

FB CONTRACTORS OF FLORIDA 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 05/17/2024 and assigned Florida document number L24000230857.

This amendment is submitted to amend the following:

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

FB HOMES DEVELOPER 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)

738 W SAND LAKE RD

SUITE 500

ORLANDO, FL 32819

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

738 W SAND LAKE RD

SUITE 500

ORLANDO, FL 32819

**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:

BT7 PARTNERS TAX COMPLIANCE SERVICES LLC

New Registered Office Address:

7680 UNIVERSAL BLVD SUITE 380

*Enter Florida street address*

ORLANDO

*City*

, Florida 32819

*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.*

LUIS GONCALVES

If Changing Registered Agent, Signature of New Registered Agent

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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	BERETA JR, FRANCO ANDRE	738 W SAND LAKE DR	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		ORLANDO, FL 32819	<input type="checkbox"/> Change
MGR	RUBACK, FELIPE	738 W SAND LAKE DR	<input checked="" type="checkbox"/> Add
		SUITE 500	<input type="checkbox"/> Remove
		ORLANDO, FL 32819	<input type="checkbox"/> Change
MGR	DE CASTRO GALVAO NETO,	13319 SW 42ND CIR	<input checked="" type="checkbox"/> Add
		OCALA, FL 34473-7804	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LUCY M SOELLA BERETA	AV. CHAMPAGENAT 126	<input type="checkbox"/> Add
		COLATINA, AL 29707	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LAIS SOELLA BERETA	AV. CHAMPAGENAT 126	<input type="checkbox"/> Add
		COLATINA, AL 29707	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RUBACK, FELIPE	AV CHAMPAGENAT 126	<input type="checkbox"/> Add
		COLATINA, AL 29707	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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>
AMBR	BERETA JR, FRANCO ANDRE	13319 SW 42ND CIRCLE	<input type="checkbox"/> Add
		Ocala, FL 34473	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FL

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TALLAHASSEE FL

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific.)

(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 is a date that is not a business day, the date shall be the next business day.

**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 OCTOBER 25TH 2024



Signature of a member or authorized representative of a member

FRANCO ANDRE BERETA JR

Typed or printed name of signee

**Filing Fee: \$25.00**