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COVER LETTER

TO: Registration S Division of Co		٠.		e.	
Results Co	onstruction Groups L.L.C		-	.*	
SUBJECT:		nited Liability Company	<u></u>		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	Jose Angel Estevez Toribi	o			
		Name of Person			
	Results Construction Grou	ps L.L.C			
		Firm/Company			
	2975 Boating Blvd				
Results Construction Groups L.L.C Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: Jose Angel Estevez Toribio					
	Kissimmee FL 34746				
		City/State and Zip Code			
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: Jose Angel Estevez Toribio					
For further information (·	,		
Jose Angel Estevez Tori	bio				
Name (of Person	Area Code Daytime	Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee		Certified Copy	Certificate Certified (of Status &	
Registration Division of O P.O. Box 632	Section Corporations 27	Registration Sec Division of Corp The Centre of Ta	oorations allahassee Street, Suite 81	SECHLIAGY OF	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Results Construction Groups L.L.C.

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on 05/2	4/2024	and assigned
Florida document number L24000241438			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the des	ignation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our rec	ords, <u>enter the name</u>	of the new registere
		- .	
New Registered Office Address:	Enter Florid	a street address	
		Ela-ida	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>		53
hereby accept the appointment as registered agent and agree or ovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of m provided for in Ch	pacity. I further agree by duties, and I am fa apter 605, F.S. Or, confirm that the lim	miliar with and finis document-is

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
AMBR	Ulrick Alfred	2311 Clay St, Kissimmee FL 34741	≅ Add
			□Remove
			☐ Change
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Effective date, if other than If an effective date is listed, the dat Note: If the date inserted in th document's effective date on the	iis block does not m	iect the applicabl	date of filing or more le statutory filing re	equirements, this d	ate will no	t be liste	ed as t
e record specifies a delayed effert is filed.	ective date, but not	an effective time	:, at 12:01 a.m. on	the earlier of: (b)	SOUCH INKE OF STATE	没 after	the
June 20	,	2024			NHAS NHAS	_12	
Dated					$S \subseteq S$	긒	f t
Dated	Estevez Toribio				111,42	_	6
Dated		nember or authoriz	ed representative of	a member	EE, FL		L

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