## L24000255765

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## **COVER LETTER**

TO:

Registration Section

Division of Co	orporations				
	LO CONTRACTOR S.A. LLC				
SUBJECT:	Name of Lim	ited Etability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	DOUGLAS J. ARGUELL	O LEAL			
	- <del>-</del> -	Name of Person	-	=	
	ARGUELLO CONTRAC	TOR S.A. LLC			
		Firm/Company		=	و ٠٠
	618 GERALD AVE APT	423			
		Address			<i>t</i> .
LEHIGH ACRES. FL 33936				60.	 — <del>11</del>
		City/State and Zip Code			PM 2: 2
	ARGUELLLOLEALJHON	@GMAIL.COM to be used for future annual report not	ilication)	FAT AT	2
For further information	concerning this matter, please c		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 ' 1	
DOUGLAS J. ARGUE	ILLO LEAL	786 9610357			
Name	of Person	at () Area Code Daytir	ne Telephone Number	Γ	
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)	Certified	ite of Stati	
Mailing Addr Registration	Section	Street Address: Registration So			
Division of P.O. Box 63	Corporations 327	Division of Co The Centre of	•		
Tallahassee		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARGUELLO CONTRACTOR S.A. 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  $\frac{06/04/2024}{2000}$ and assigned Florida document number 1.24000255765 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ARGUELLO CONTRACTOR AND PAINTING S.A. LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: NA Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida \_

## 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.

City

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>	<u>Address</u>	Type of Action
MGR	YANET HERNANDEZ CINTERO	733 LA PLATA AVE	≣Add
		LEHIGH ACRES, FL 33974	□Remove
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n effecti te:    If t	e date is listed, the date mu ie date inserted in this b	st be specific and cannot lock does not meet the	be prior to date of files applicable statute	ing or more than 90 days	after filing.) Pur	suant to 605.02
cument	s effective date on the D	Department of State's r	ecords.	ry ming requirement	s, tills date with	not be fisted
cord sp	ecifies a delayed effectiv	ve date, but not an effe	ective time, at 12:0	l a.m. on the earlier of	of: (b) The 90	th day after il
s filed.						
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ted	07/19	12024				
	• /	1/2024				
		Signature of a member	or authorized repres	entative of a member		
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		<b>,</b> '	·			

Filing Fee: \$25.00