

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

# L24000325500339330

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000325500 3)))



H240003255003ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LAMADRID FINANCIAL SERVICES CORP  
Account Number : I20200000059  
Phone : (954)727-9771  
Fax Number : (954)727-9773

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: dlom@lamadridfinancial.com

SEAL OF THE STATE  
TALLAHASSEE, FL

2024 SEP 24 PM 4:29

FILED

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
WOLD CONSTRUCTION SERVICES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M. SOLOMON

SEP 30 2024

Electronic Filing Menu

Corporate Filing Menu

Help

< H24000325500 3 >

<H240003255003>  
COVER LETTERTO: Registration Section  
Division of CorporationsSUBJECT: WOLD CONSTRUCTION SERVICES 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:

MARCOS MARTINEZ

Name of Person

WOLD CONSTRUCTION SERVICES LLC

Firm/Company

2101 SW 42ND AVE

Address

FORT LAUDERDALE, FL 33317

City/State and Zip Code

mdjkmartinez@gmail.com

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

For further information concerning this matter, please call:

MARCOS MARTINEZ

952 465-2583  
at ( )

Name of Person

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 32314Street Address:Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

&lt;H240003255003&gt;

RECEIVED  
STATE  
TALLAHASSEE, FL

2024 SEP 24 PM 4:29

FILED

< H24 000325500 37

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WOLD CONSTRUCTION SERVICES 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 08/07/2024 and assigned  
Florida document number L24000339330.

This amendment is submitted to amend the following:

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

N/A

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)

901 S MILITARY TRAIL A-7

WEST PALM BEACH, FL 33145

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

901 S MILITARY TRAIL A-7

WEST PALM BEACH, FL 33145

**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:

N/A

New Registered Office Address:

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 Changing Registered Agent, Signature of New Registered Agent

< H24 000325500 37

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

< H24 000 32 5500 3 >

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

RECEIVED  
2024 SEP 24 PM 4:29  
SECOND FLORIDA STATE  
TALAHASSEE, FL

< H24 000 32 5500 3 >

<H240003255 003>

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

N/A

2026 SEP 24 PM 4:29  
STATE OF FLA  
TALLAHASSEE, FL

7  
F  
m  
D

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(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 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 September 24 2024

Marcos Martinez

Signature of a member or authorized representative of a member

MARCOS MARTINEZ

Typed or printed name of signer

$\langle 4240003255003 \rangle$