L24000526049

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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TALLAHASSEE, FL

25 MAY 22 PH 12: 21

K. K. luly

COVER LETTER

Division of Co		•			
	RUCT BUILDERS LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	STEPHANIE RIVERA A	SENCIO			
		Name of Person			
		Firm/Company			
Address					
	PLANT CITY, FL 33563			2925 SEC	
	AP@REBARANDEXCAV	City/State and Zip Code 'ATING.COM		2025 HAY 22 PM 12: 21 SECRETATO F STAT TALLAHAS SEE, FL	
	E-mail address: (to be used for future annual report notific	cation)	基於 22	
For further information	concerning this matter, please c	all:		PHI	
STEPHANIE RIVERA	ASENCIO	863 600-6895 at ()		12: 21 STATI E, FL	
Name (of Person		Telephone Number		
Enclosed is a check for t	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 B Certificate of Certified Copy (additional copy i	Status &	
Mailing Addre Registration Division of C P.O. Box 63:	Section Corporations	Street Address: Registration Sect Division of Corp The Centre of Ta	orations		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		City		Zip Code
	PLANT CITY		, Florida	3
		Enter Florida stre	vet address	
New Registered Office Address:	1001 E BAKER	R ST STE 400		
Name of New Registered Agent:	STEPHANIE R	IVERA ASENCIO		
ent and/or the new registered office addr				tu.
If amending the registered agent and/or		ddress on our records	s, enter the name o	of the new-regist
				H 53 F
Maining dauress MAT BE A POST OFFICE BOX)				A COLOR
failing address MAY BE A POST OFFICE	F ROY)	PLANT CITY, FL 33:	563	15 20 20 20 20 20 20 20 20 20 20 20 20 20
Inter new mailing address, if applicable:		1001 E BAKER ST S'	ГЕ 400	SECRETALIANA
				S 70
rincipal office address MUST BE A STRE	ET ADDRESS)	PLANT CITY, FL 333	703	. ~2
Enter new principal offices address, if applicable:		PLANT CITY, FL 33:		
e new name must be distinguishable and contain the	words "Limited Liabil			eviation "L.L.C."
If amending name, enter the new name	of the limited liabi	ility company here:		
is amendment is submitted to amend the fol	llowing:			
orida document number [24000526049				
ne Articles of Organization for this Limited	Liability Company	were filed on 12/19/20.	24	_ and assigned
(Name of the Lim	ited Liability Compa	ny as it now appears on or liability Company)	<u>ir records.</u>)	

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.

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	ANTONIO ELIZALDE ORTIZ		□Add
			Remove
			Change
MGR	STEPHANIE RIVERA ASENCIO	180 ROYAL FERN DR	Add
		LAKE ALFRED, FL 33850	□Remove
			□Change
			□Add
			202544AY SERROVET TALLL
			2025 MAY 23 PH 12: 21 SEGRICTA CHARACTER AND FL CRemove
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other informa	,	, , , , , , , , , , , , , , , , , ,	
-			
			2025 HAY SECIKET TALLA
			<u> </u>
	05/12/2025		188 P
E. Effective date, if other than the (If an effective date is listed, the date mus <u>Note:</u> If the date inserted in this bl document's effective date on the D	st be specific and cannot be prior to date ock does not meet the applicable s	(optional to filing or more than 90 days after filing tatutory filing requirements, this date	2.) Pursuant to 605.0209 (3)(b)
f the record specifies a delayed effective cord is filed.	re date, but not an effective time, at	t 12:01 a.m. on the earlier of: (b) T	he 90th day after the
Dated MAY 13	2025		
Acus	-		
<i>f</i>	Signature of a member or authorized	representative of a member	
ANTONIO ELIZALDE			
	Typed or printed nan	ne of signee	

Filing Fee: \$25.00