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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VP ACCOUNTING AND SERVICES LLC

Account Number : I20240000138 Phone : (786)518-0497 Fax Number : (786)667-5135

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

info@vpaaconsulting.com Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 3 POINTS CONSTRUCTION USA LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Page: 3 of 5

3 POINTS CONSTRUCTION USA LLC	*
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability Company were filed on 02/17	/2025 and assigned
Florida document number <u>L25000068194</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	:
The new name must be distinguishable and contain the words "Limited Liability Company," the design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	02.
Enter new mailing address, if applicable:	. N
(Mailing address MAY BE A POST OFFICE BOX)	~ · · · · · · · · · · · · · · · · · · ·
	••
B. If amending the registered agent and/or registered office address on our reco agent and/or the new registered office address here:	rds, <u>enter the name of file new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida	street aldress
	, 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

Zip Code

To- Division of Corporations Page: 4 of 5 2025-07-24 16:56:33 GMT 17866675135

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

Frç

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	GONZALEZ, GERMAN		□Add
		1820 N CORPORATE LAKES BLVD SUITE 206 WESTON, FL 33326	Remove
			□Change
AMBR	GAMBOA, LIZZETH		□Add
		1820 N CORPORATE LAKES BLVD SUITE 206 WESTON, FL 33326	<b>≡</b> Remove
			□Change
		<u></u>	□Add
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Effective date, if other than the	date of filing:	(optional) ng or more than 90 days after filing.) Pursuant to 605.0207 (3)
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statuto	ry filing requirements, this date will not be listed as the
he record specifies a delayed effective ord is filed.	date, but not an effective time, at 12:0	l a.m. on the earlier of: (b) The 90th day after the
JULY, 24 Dated	2025	
	Signature of a member or authorized represe	

Typed or printed name of signee