MO600006118

Office Use Only



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COVER LETTER

Division of Corporations		
SUBJECT: Down Construction (Name of Foreign I	Dompay of Fi Limited Liability Compa	Jovida, CCC
Dear Sir or Madam:		
The enclosed application, certificate and fee(s) are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Roger G. Rumisez Name of Person	<u>. </u>	
Dan Const. Co of Flore Firm/Company	ida, CCC	
15310 Amberly Drive, 5	te, 250	
Tanpa, FC 33647 City/State and Zip Code		
Rramirez e dou companies E-mail address: (to be used for future annual re	port notification)	
For further information concerning this matter, ple		
Roger Ramirez a	1(<u>941</u>) 234	<i>'-よ</i> フフフ
Name of Person	Area Code & Daytime	e Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount: \$\Begin{array}{c} \$25\$ Filing Fee & Status & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

TO:

Registration Section



October 6, 2017

ROGER G RAMIREZ 15310 AMBERLY DRIVE, STE 250 TAMPA, FL 33647

SUBJECT: DOAN CONSTRUCTION COMPANY OF FLORIDA, LLC

Ref. Number: M06000006118

We have received your document for DOAN CONSTRUCTION COMPANY OF FLORIDA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 617A00020273

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Day Constructors Company of Florida, CCC
Enter new principal office address, if applicable: 15310 Amberly Dr.
(Principal office address 54e. 250
MUST BE A STREET ADDRESS) TAMP, FC 33647
Enter new mailing address, if applicable: 15310 Amberly Dr.
(Mailing address MAY BE A POST OFFICE BOX) 54e, 250
2. The Florida document number of this limited liability company is: MO600000 6118
2. The Florida document number of this limited liability company is: MO60000 6118
3. Jurisdiction of its organization: State of FC MI
4. Date authorized to do business in Florida: 1/1/3/06
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company:
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attachracopy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer 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: Rogelio O. Komirez
New Registered Office Address: 1226 Baycrest Dr. Enter Florida Street Address Wesley Chapel, Florida 33544 City Zip Code
Enter Florida Street Address
Wesley Chapel Florida 33844
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 603, 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

8. If the amendr	ment changes person, title or capacity in acc	ordance with 605.0902 (T)(e), indicate th	at change:
Title/Capacity MBR	Name Rogelio O. Ramirez	1226 Bayerect. Dr 1226 Charel FC 33	
			Remov
16R	Kevin Hoatlin	'3670 Carperter Rd.	∏Add
		Apsilanti MI 4819	
16 K	Matthew A. Down	3670 CArpenter K	Add
		Aprilanti, MI 4819	7 Remov
			Add
			Remov
			Add
			Remov
aforemention	n certificate, if required: no more than 90 daned amendment(s), duly authenticated by the inder the law of which this entity is organized.	ne official having custody of records in t	2017 GCT
		authorized representative	* 65
	Typed or printe	d name of signee	E 120 120 120 120 120 120 120 120 120 120

Filing Fee: \$25.00