

MD9000001804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 09/02/2022

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*W: C D W*

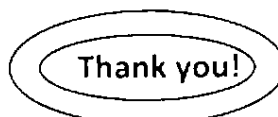
Name:	BLOCK BUILDERS, LLC
Document #:	
Order #:	14522397

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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CLERK OF STATE  
TALLAHASSEE, FL

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE  
STATE OF FLORIDA**

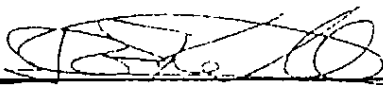
We, the undersigned, do hereby certify that I am the Authorized Person

of Block Builders, LLC  
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of  
Louisiana  
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the  
requirements of the s. 605.0112, F.S., the limited liability company hereby adopts the  
following name to transact business in the state of Florida:  
Block Builders of LA, LLC

(Name to be used by limited liability company in Florida. NOTE: Name must contain Limited Liability  
Company, L.L.C., or LLC.)

  
\_\_\_\_\_  
Signature Authorized Person

8/22/22  
\_\_\_\_\_  
Date

**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: Block Builders, LLC

Enter new principal office address, if applicable: 39279 Tommy Moore Rd

(Principal office address  
MUST BE A STREET ADDRESS) Gonzales, LA 70737

Enter new mailing address, if applicable:

(Mailing address  
MAY BE A POST OFFICE BOX) 39279 Tommy Moore Rd  
Gonzales, LA 70737

2. The Florida document number of this limited liability company is: M09000001804

3. Jurisdiction of its organization: Florida

4. Date authorized to do business in Florida: 5/9/2009

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Block Builders of LA, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy 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: .....

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

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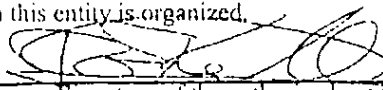
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7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jason E. Keller	4545 Post Oak Place Dr Ste 150	<input checked="" type="checkbox"/> Add
		Houston, TX 77027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Jason E. Keller

Typed or printed name of signee

Filing Fee: \$25.00

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