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(((H240003014113)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CUEVAS, GARCIA & TORRES, P.A.

Account Number : I20030000123 : (305)461-9500 Phone : (786)362-7127 Fax Number

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

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

SECTION	N I (1-4 must be completed)		
1. Name of limited liability Company as it appear	irs on the records of the Florida Department of		
State: FORT MYERS CONSTRUCTION, LLC			
Enter new principal office address, if applicable:	N I (1-4 must be completed) ars on the records of the Florida Department of 1600 Ponce de Leon Blvd., Suite 1103 Coral Gables, FL 33134		
(Principal office address	Coral Gables, FL 33134		
MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	1600 Ponce de Leon Blvd., Suite 1103		
(Mailing address MAY BE A POST OFFICE BOX)	Cotal Gables, FL 33134		
2. The Florida document number of this limited lie	iability company is: M2300000866		
2. The Fiorita document humber to this immedia.	latelity company is.		
	* 119 GL *		
4. Date authorized to do business in Florida: $\frac{01/1}{1}$	18/2023		
SECTION II (5-9 complete only the applicable	changes)		
5. New name of the limited liability company:	ist contain "Limited Liability Company, " "L.L.C.," or "LLC.")		
(mus	ist contain. Limited Liability Company. E.F.C., or EFX		
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	ed for the purpose of transacting business in Florida and attach a anaging members adopting the alternate name. The alternate nameC." or "LLC.")		
registered agent and/or the new registered office a	red officer address on our records, enter the name of the new address here:		
Name of New Registered Agent: Cuevas, Garcia	& Torres, P.A.		
New Registered Office Address: 4000 Ponce de Leon Blvd. Suite 770 Enter Florida Street Address			
the provisions of all statutes relative to the proper and accept the obligations of my position as regis document is being filed to merely reflect a change liability company has been notified in writing of the	ent and agree to act in this capacity. I further agree to comply with er and complete performance of my duties, and I am familiar with stored agent as provided for in Chapter 605, F.S. Or, if this e in the registered office address, I hereby confirm that the limited		

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MBR ONX, Inc Remove MGR NA INVESTMENTS WEST COAST LLC 1600 Ponce de Leon Blvd., Suite 1103 Add Coral Gables, FL 33134 DRemove Dadd DRemove	Fitle/ Capacity	Name	<u>Address</u>	Type of Action
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Andres Delgado as Manager of NA INVESTMENTS WEST COAST LLC, Manager Typed or printed name of signee

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Filing Fee: \$25.00