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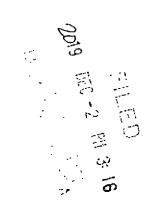
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A SIMMONS JAN - 7 2020

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: SHU CONSTRUCTION U.C.; Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Stephanie M. Cailloutt
SHI Construction UC
SZY UCIPATAISO Blud.
Wicaville Flordia, 32578 City/Stale and Zip Code
E-mail address: (to be used for filture abnual report notification)
For further information concerning this matter, please call:
Stephanie Caillouet at (850) 517-7241  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$30.00 Filing Fee \$ \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our re Liability Company)	ecords.)
were filed on 1013	017019 and assigned
ility company here:	
lity Company," the designation	"LLC" or the abbreviation "L.L.C."
	-D 1-1
	<del></del>
address on our records, <u>e</u>	nter the name of the new registered
P. d. Plant	
enter r torida street d	
Cuv	, Florida
	ility company here:

### 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

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>	Address	Type of Action
MGR	Seration H Lopez	824 Valparaiso Bud Nie	<b>'RUÌK</b> □Add
		Remove	Z Remove
			□Change
WAS	Stephaniem Caillouet	SZY VCIPOra's o Blud	XAdd
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# Page 2 of 3

If amending any other information, enter change(s) here: (Attach additional sheets  Remain and adding persons	
to manage Company (MER)	CACAMONICE
-to-thatage confeating times	
	<b>D</b> . 3
	: الجائز الجائز
	<u> </u>
Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 d  Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	
he record specifies a delayed effective date, but not an effective time, at ${f 1}$ . The 90th day after the record is filed.	2:01 a.m. on the earlier of
Dated 1/27/2019	Г
Stephanie Cainout Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00