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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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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APR 28 700

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

SECTION	(1-4 must be completed)	• •
1. Name of limited liability Company as it appears	s on the records of the Florida Departm	ent of
State: ALLSTAR CONSTRUCTION COMMER		
•	•	
(Principal office address MUST RE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
MAT BE A TOST OF FICE BOAT		
2. The Florida document number of this limited liab	bility company is: M15000006059	7020 A BECI:
3. Jurisdiction of its organization: Delaware	•	PR 2
4. Date authorized to do business in Florida: 07/31	/2015	14 C
SECTION II (5-9 complete only the applicable c	•	. STA
5. New name of the limited liability company: Ae (must		20 % 10 % 0 %
(must	contain "Limited Liability Company,"	"LLL.C." of "LLC."
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.E.C	aging members adonting the alternate in	in Florida and attach a ame. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ade	dofficer address on our records, <u>emer the dress here:</u>	ie name of the new
Name of New Registered Agent;	**************************************	
New Registered Office Address:		
	Enter Florida Street A	
	Flor	ida
New Registered Agent's Signature, if changing Reg Thereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change in liability company has been notified in writing of this	istered Ageny and agree to act in this capacity, I furt and complete performance of my duties, red agent as provided for in Chapter 60 the registered office address, I hereby	her agree to comply with and I am familiar with S. F.S. Ov. it this

If Changing Registered Agent, Signature of New Registered Agent

If the amendment ch		capacity in accordan	ce with 605,0902 (1)(e), in	licate that change:
tle/ Capacity	Nome		Address	Type of Action
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	·	No statement a series and series		
Attached is a certific; aforementioned amer jurisdiction under the	idinent(s), duly auther law of which this en	micated by the offic	ial having custody of recor	□Remov ds in the

Filing Fee: \$25.00

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'ALLSTAR CONSTRUCTION COMMERCIAL, LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'ACCEND, LLC' ON THE SECOND DAY OF APRIL, A.D. 2019, AT 1:13 O'CLOCK P.M.



Authentication: 202831719

Date: 04-27-20