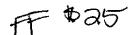
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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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06 OCT 24 PM 2: 44

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: NEISON LeonARd Plaslering and JUCED LLC. (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: |
| Leonard J. NELSON (Name of Person) |
| NELSON LEONARD Plasfering & Stuck LL (Firm/Company) |
| 3840 5W 186 CT. (Address) |
| Dunnellon, Fla. 34432 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Samuel helson at 352 36/1704 (Name of Person) (Area Code & Daytime Telephone Number) |
| (Marke of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEISEN LEONARD Plastering & Stule LLC
(Present Name)
(A Florida Limited Liability Company)

| FIRST: | The Articles of Organization were filed on 10 13 6 and assigned document number 10406040843. |
|--------|---|
| | : This amendment is submitted to amend the following: |
| CHHA | XENAME of company to |
| | LEONNE of company to LEONNED J. DE/SON |
| | Plastering AND Stuce LLC |
| | |
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| | |
| | |
| | |
| | 06 DJV. |
| Dated | 06 0CT 24 |
| | |
| | Signature of Amember or authorized representative of a member |
| | Signature of a member or authorized representative of a member |
| | Signature of Amember or authorized representative of a member Leonard Thelan Leonard Thelan |
| | Typed or printed name of signee |
| | · |

Filing Fee: \$25.00

PHONE /352)361-1704