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(Re	equestor's Name)	
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.	:	1200000019	95
REFERENCE	:	707383	4338256
AUTHORIZATION	:	Smell of	enan
COST LIMIT	:	\$ 65 00	- Man
ORDER DATE : April 2, 2019			
ORDER TIME : 1:05 PM			
ORDER NO. : 707383-010			
CUSTOMER NO: 4338256			
DOMESTIC AM: NAME: STS ENGINEERING			
EFFECTIVE DATE:			
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCOME.	RPOR	NOITA	
PLEASE RETURN THE FOLLOWING AS	PROO	F OF FILING	3 :
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STAI	NDIN	G	

EXAMINER'S INITIALS:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

COVER LETTER

TO:	Registration So Division of Cor			
eun II	STS Engin	eering Solutions LLC		
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Laura-Jayne Urso		
		 	Name of Person	
		Kirkland & Ellis LLP		
			Firm/Company	
		601 Lexington Avenue		
			Address	· · · · · · · · · · · · · · · · · · ·
		New York, NY 10022		
			City/State and Zip Code	
		E-mail address: (i	o be used for future annual report notifi	ication)
or fur	ther information o	oncerning this matter, please ca	ill:	
	Name o	f Person	at ()	Telephone Number
los	ed is a check for the	ne following amount:		
\$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

	, Florida	Zip Code
New Registered Office Address:	Enter Florida street address	
Name of New Registered Agent:		
		<u> </u>
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records, <u>en</u> <u>ss here</u> :	ter the name of the new
n te li		m R m
		55 - 12 F
(Mailing address MAY BE A POST OFFICE BOX)		A S TI
Enter new mailing address, if applicable:		7 E
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
A. If amending name, enter the new name of the limite	ed liability company here:	
This amendment is submitted to amend the following:		
Florida document number L06000017080	•	
The Articles of Organization for this Limited Liability Con	npany were filed on February 15, 2006	and assigned
(A Florida Li	imited Liability Company)	
(Name of the Limited Liability)	Company as it now appears on our records.) imited Liability Company)	

ew Registered Agent's Signature, if changing Registered Agent:

sereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ng filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability apany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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	Get 'Er Done LLC	2068 Hidden Hollow Lane	ET A da
		Henderson, NV 89012	
			■ Remove
			□ Change
AMBR	Get 'Er Done LLC	2000 NE Jensen Beach Blvd.	■ Add
		Jensen Beach, FL 34957	
			□ Remove
			Change
<u>_</u>	 		
			☐ Remove
			☐ Change
			
			Add Remaye
			G Change
			G. C.
		 	Remove
			Change
			Add
			□ Remove
			□ Change

				
				
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ective date, if other the effective date is listed, the	date must be specific and c	annot be prior to date	of filing or more than 90 da	(optional) ays after filing.) Pursuant to 605.02
te: If the date inserted in cument's effective date of			atutory filing requireme	nts, this date will not be listed
annead executive.	alassa di aggiorni di di	ka lauk a	.ce .v	
he 90th day after t	elayed effective da ne record is filed.	ite, but not an e	errective time, at 12	2:01 a.m. on the earlier
ed April 2		2019		
icu	· · · · · · · · · · · · · · · · · · ·	·		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00