L66000004/034

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EXAMINER

COVER LETTER

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Division of Co	rporations			
SUBJECT:	MB Precisio	n Carpentry LLC		
SUBJECT.		ited Liability Company)		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Mateusz Barcis		
		(Name of Person)		
	MB	Precision Carpentry LLC		
	(Firm/Company)			
	2239 Yankee Terrace			
		(Address)		
	North Port, FL 34286			
	(City/State and Zip Code)			
For further information	concerning this matter, please of	eall:		
Matt Barcis		at (941) 286-0105		
(Name	e of Person)	(Area Code & Daytime	Celephone Number)	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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

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

SECRETARY OF STATE DIVISION OF CORPORATIONS

MB	Precision Carpentry LLC	ONS ONS
(Name of the Limited L (A F	iability Company as it now appears on outlined Liability Company)	ır records.)
The Articles of Organization for this Limited Lial	bility Company were filed on 04/20/20	and assigned
Florida document number <u>L06000041034</u>	·	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," th	e designation "LLC" or the abbreviation
B. If amending the registered agent and/or the new registered offi		cords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	(Enter Fl	orida street address)
	, Florida	
	(City)	(Zip Code)

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 608, 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)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title **Type of Action** <u>Name</u> <u>Address</u> MGRM Elise Hay 17397 Cox Avenue **✓** Add Port Charlotte, FL 33948 Remove Add Remove Add Remove Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated February 13 2008 Signature of a member or authorized representative of a member Mateusz Barcis

, If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00