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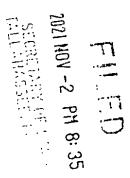
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
	J. HOR	NE
	NOV 12	2021
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Office Use Only



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## **COVER LETTER**

	Registration Se Division of Cor			··
		RNHAM CONSTRUCTION, I	LLC	
SUBJEC	л:	Name of Limi	ted Liability Company	·
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		TJ CORBIN, ESQ		
			Name of Person	
		CORBIN & ASSOCIATES	5, P.A.	
			Firm/Company	
		238 NE FIRST AVENUE		
		<del></del>	Address	
		DELRAY BEACH, FL 334	444	
			City/State and Zip Code	· · ·
		TJCORBIN@CORBINLAV		<u> </u>
			to be used for future annual report notif	neation)
For furth	ner information c	oncerning this matter, please ca	ail:	
TJ COR	BIN, ESQ		561 563-9438 at ( )	
	Name o	f Person		e Telephone Number
Enclosed	d is a check for t	ne following amount:		
<b>■</b> \$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 Addres Registration		<u>Street Address:</u> Registration Se	ction
	Division of C	Corporations	Division of Cor	•
	P.O. Box 632 Tallahassee		The Centre of T	allahassee e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records & CRETARY OF CALL

FILED

MARK FARNHAM CONSTRUCTION, LLC

2021 NOV -2 PM 8: 35

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{04/10/2007}{}$ \_\_\_\_\_ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

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	TAYLOR, MICHAEL K.	575 LUCAS PLACE	🗆 🗆 Add
		MERRIT ISLAND, FL 32952	■Remove
			Change
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		<u></u>	🗆 Add
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fective date, if other than th in effective date is listed, the date mi	e date of filing:		(opt	ional)
in effective date is listed, the date months of the date inserted in this b	ist be specific and cannot block does not meet th	the prior to date of filit e applicable statutor	ng or more than 90 days and ry filing requirements, th	er filing.) Pursuant to 605.0207 his date will not be listed as
ocument's effective date on the l			, ,	
record specifies a delayed effecti	ve date, but not an eff	ective time, at 12:01	a.m. on the earlier of: (	b) The 90th day after the
is filed.				
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ated	Signature of a member	r or authorized represe	entative of a member	