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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJ	R & D CON	NSTRUCTION GROUP, LLC		
J C B	<u></u>	Name of Lim	ited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	e return all correspo	ndence concerning this matter	to the following:	
		JEFFREY L. PRICE, ESQ		
			Name of Person	
		NIESEN, PRICE, WORTH	IY, CAMPO, P.A.	
			Firm/Company	
		5216 S.W. 91 Drive		
			Address	
		Gainesville, FL 32608		
			City/State and Zip Code	
		jeff@npw-law.com		
		E-mail address: (to be used for future annual report noti	fication)
For fi	urther information co	oncerning this matter, please ca	all:	
Jeffre	ey L. Price		352 373-9031 at (
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclo	osed is a check for th	ne following amount:		
\$	25.00 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:

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

	-		<u> </u>	2015
R & D CONSTRUCTION GROU	•		2000 连四	幂 11
(Name of the Lim	ted Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	15.55 5.55 5.55 5.55 5.55 5.55 5.55 5.5	
			ARY OF S	
The Articles of Organization for this Limited L	iability Company were fi	iled on <u>04/16/2007</u>	-η-ή 	Und assigned
Florida document number L07000040619	·		STATE	ب
This amendment is submitted to amend the fol	lowing:		ο Α	50
A. If amending name, enter the new name of	of the limited liability co	mpany here:		
The new name must be distinguishable and contain the	words "Limited Liability Com	pany," the designation "LLC" c	or the abb	reviation "L.L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	ROV)			
Mutang maness WAT DE AT OST OFFICE	<u></u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				
B. If amending the registered agent and	for registered office as	dress on our records	enter t	he name of the new
registered agent and/or the new registered of		idieso on odi recordo,	circe t	it have or the ner
Name of New Registered Agent:	JEFFREY L. PRICE, E	ESQ.		
New Registered Office Address:	5216 S.W. 91 Drive			
		Enter Florida street address		
	Gainesville	, Flori	ida ³²⁶	08
	Cit			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 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.

If Changing Registered Agent, Signature of New Registered Agent

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
		*****	Change
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