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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ossi Contracting 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:
Jack N. Ossi Jr. Name of Person
Ossi Contracting, LLC Firm/Company
1112 3 rd Street, Swite 4
Nepture Beach FL 32266 City/State and Zip Code Juck @ ossidevelopment.com Femal address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sack Ossi Name of Person at (904) Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$\text{Certified Copy} (additional copy is enclosed) \$\Bigcup \$\text{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

Ossi Contractin	y, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	n <mark>y as it now appears on our records.</mark>) Liability Company)		
The Articles of Organization for this Limited Liability Company of Florida document number <u>Lo 70000 69 79 1</u> .	were filed on 7/5/2007 and assign	ed	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ility company here:		
The new name must be distinguishable and contain the words "Limited Liability and Contain the Words "Liability and Contain the Words" "Lia	ity Company," the designation "LLC" or the abbreviation "L.L.C		
Enter new principal offices address, if applicable:	OLVISION OF		
(Principal office address MUST BE A STREET ADDRESS)	- ON THE		
		<u> </u>	
	30 - 3300 30 - 3300	e LL	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	15		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre	ee to act in this capacity. I further agree to comply	with the	

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 = 'Authorized Member Type of Action **Title Address** Name Nepture Beach, FL 32266 Remo Benny J. Ossi, Jr. ☐ Change □ Add □ Remove _□ Change □ Add ☐ Remove DIVENDE CONTRACTOR □ Add ☐ Remove □ Change ☐ Add □ Remove ☐ Change

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	Signature	e of a member of ac	thorized representat	ive of a member		

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Filing Fee: \$25.00