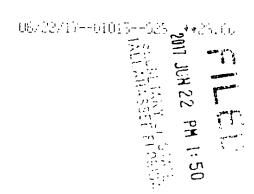
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(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phon	e #)
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Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer.	

Office Use Only



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M. Hakkele

COVER LETTER

TO: Registration So Division of Cor				
	RJ Spencer	Construction LLC		
SUBJECT:	Name of Lim	Name of Limited Liability Company		
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
		Roderick Spencer		
		Name of Person		
		RJ Spencer Construction LLC		
	···	Firm/Company		
	2	0535 NW 2nd Ave Suite 202		
Address				
	Ŋ	Iiami Gardens, FL. 33169		
City/State and Zip Code				
		nfo@rjsconstructs.com		
		to be used for future annual report not	tication)	
For further information c	oncerning this matter, please ex	ılf:		
Roderick Spencer		786 443-5346		
Name c	of Person	at ()	ic Telephone Number	
Enclosed is a check for t	he 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 radditional 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

RJ Spe	encer Construction LLC	
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on7-10-2009	and assigned
Florida document number L09000067136		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Liu	mited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	(RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		201
B. If amending the registered agent and/or regi	istered office address on our records,	enter the name of the ner
registered agent and/or the new registered office add		D 2
		ignerate.
Name of New Registered Agent:		<u>.</u>
New Registered Office Address:		
	Enter Florida street address	
	Flori	
	CHV	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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change

If amendin	g any other informatio			-	necessary.)		
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Note: If the document's document docu	ate, if other than the da date is listed, the date must be date inserted in this block effective date on the Depa specifies a delayed en day after the recor	k does not meet the artment of State's re	applicable statutory ecords.	filing requirements	, this date will not	he listed r	is th
Dated	6-18	2017	·				
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_	SI	gnature of a member of	or authorized represent	ative of a member		1017	420
		Roderick Spencer			요 교무 가전	KUL	
_			or printed name of sign	ee	<u> </u>	_22	
			Page 3 of 3			PH I:	
		Fili	ng Fee: \$25.00		المرابع	50	