L1000111635

(Requestor's Name)			
(Address)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			

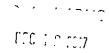
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COVER LETTER

	Registration Se Division of Cor				
SUD IE		D CONCRETE SOLUTIONS	, LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company		
The encle	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		BRANDON LITTLE			
			Name of Person		
LEFT HAND CONCRETE SOLUTIONS, LLC					
			Firm/Company		
		1420 S FLORIDA AVE			
			Address		
		LAKELAND FL 33803			
			City/State and Zip Code		
		brandon@lefthandconcrete.			
			to be used for future annual report not	ification)	
For furth	er information co	oncerning this matter, please co	all:		
ELIZAB	ETH FRANK		863 284-0637		
	Name of	Person	Area Code Daytin	ne Telephone Number	
Enclosed	is a check for th	e following amount:			
\$25.0	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

LEFT HAND CONCRETE SOLUTIONS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{10/26/2010}{10}$ and assigned Florida document number <u>L10000111635</u> 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 , Florida _

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 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>	<u>Address</u>	Type of Action
AMBR	SEAN HARPER	5141 TERRY LN	■ Add
		LAKELAND FL 33813	Remove
			Change
AMBR	BRANDI HARPER	5141 TERRY LN	
		LAKELAND FL 33813	Remove
			□ Change
AMBR	JENNIFER LITTLE	1357 SCOTTLAND DR.	Add
		LAKELAND, FL 33813	☐ Remove
٠			Change
·			
			□ Remove
			Change
			D Add
			Remove
			Change
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			□ Change

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ffective date, if other than the dan effective date is listed, the date must ote: If the date inserted in this block ocument's effective date on the Department.	be specific and cannot be ck does not meet the a	e prior to date of filing of	or more than 90 days after iling requirements, th	er filing.) Pursuant to 605.	.020 ed a
e record specifies a delayed The 90th day after the reco		ut not an effectiv	e time, at 12:01	a.m. on the earlie	er (
nted	. 2017	·			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00