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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Woodworx Construction, 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: Esteban Villanueva Name of Person Woodworx Construction, LLC Firm/Company 210 Pearl St.	MENON OF SECTION OF SE	13 SEP 26 AM 9: 15
Mascotte FL 34753 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Esteban Villanueva at 352, 396-1022 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount: 25.00 Filing Fee \$\square\$\$\$\$\$\$\$\$55.00 Filing Fee & \$\square\$	ng Fec,	

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Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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(additional copy is enclosed)

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Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Opportunations

	nstruction, LLC
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number \(\bigcup_1 \overline{1000706}\)	Company were filed on 6 17 11 and assigned 47.
This amendment is submitted to amend the following:	:
A. If amending name, enter the new name of the li	imited liability company here:
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADI	DRESS)
	ALC: 3
Enter new mailing address, if applicable:	25
(Mailing address MAY BE A POST OFFICE BOX)	
(muning unitess mai blaids)	
	3 n
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	gistered office address on our records, <u>enter the name of the new</u> <u>ddress here</u> :
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 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action Title** Address **Name** Elisabeth Villanueva 210 Pearl St. MGRM Mascotte, FL 34753 Remove Remove Remove Remove Remove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	September 4, 2013.
	Signature of a member or authorized representative of a member
	Signature of a member of authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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