Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 : (323)962-8600 Phone : (323)962-3889 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BECKETT CONSTRUCTION, LLC

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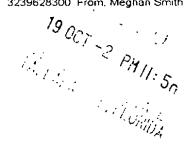
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TO: Registration Section

COVER LETTER

Division of	Corporations		
	TT CONSTRUCTION, LLC		
SUBJECT:	Name of Lim	ited Linbility Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	. <u></u>
	Glendale, CA 91203		
		City/State and Zip Code	
	wbcckett8@tampabay.rr.co		
	E-mail address: (to be used for future annual report not	ification)
For further information	on concerning this matter, please o	all;	
Cheyenne Moseley		800 773-0888	
Nar	ne of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fee	_	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Iahassee, FL 32314	STREET/COUR Registration Section Division of Corpor Cliffon Building 2661 Executive C Tallahassee, FL 3	on orations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



BECKETT CONSTRUCTION, LLC		
(Nume of the Limited Liubi (A Florid	lity Company as it now appears on our recoids Limited Liability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited Liability	Company were filed on 02/05/2013	and assigned
Florida document number 1.13000018216	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Works In Woods, LLC		
The new name must be distinguishable and contain the words "Lic	mited Liability Company," the designation "LL	.C" or 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		
B. If amending the registered agent and/or regi		ds, enter the name of the
registered agent and/or the new registered office ad-	dress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street uddr	ess
	. 1	Torida
	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 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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
Title	Name	Address	Type of Action
			Remove
		••••	Change
			□ Add
			Remore
			Change C
			D Add 5
			Remove
			□ Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			□ Change
			D Add
			☐ Remove
			Change

D.

		 				
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an office lote: L	f the date inserted in thi	must be specific and shock does not a	d cannot be prior to meet the applica	o date of filing or m ble statutory filin	iore than 90 days afte	ional) r filing.) Pursuant to 605.020 is date will not be listed a
ocume	nt's effective date on th	e Department of :	State's records.			
The S	ord specifies a dela 90th day after the	yed effective (record is filed.	date, but not	an effective	time, at 12:01	a.m. on the earlier o
	September 20		,	<u>.</u> .		
ated _		21				
ated _	William	Och	w	ized representative		

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Filing Fee: \$25.00