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SECRETARY OF STATE

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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	krwood Light Name of Limi	Steel Frame Conted Liability Company	onstruction LLC
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
	ndence concerning this matter		
		Bing Xu Name of Person	
		Firm/Company	
	215 S. M	Monroe St, STE 30	3
	Tallah	assee FL 3230 City/State and Zip Code 4 @ 9mail Com to be used for future annual report notifi	
For further information c	E-mail address: () oncerning this matter, please of		ication)
Bing Name o	Xu f Person	at (850) 294 Area Code Daytime	-6959 e Telephone Number
Enclosed is a check for the	ne 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 (additional copy is enclosed)
Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	rations AND Conter Circles

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Silverwood Light Steel Frame Construction LC (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
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 "L.L.C."
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:
registered agent and/or the new registered office address nere.
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 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.

Page 1 of 3

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 **Title** Type of Action <u>Name</u> Address 15345 Amberly Drive, Tampa, FL 33647 Chong Yo MGR ☐ Remove ☐ Change □ Add _□ Remove ☐ Change □ Add □ Remove _□ Change □ Add ☐ Remove ☐ Change _□ Add ☐ Remove Remove

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