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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Radacky L Name of Limi	Oclding LLC ted Liability Company	<u> </u>
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspor	idence concerning this matter t	o the following:	
	Kath	Lee Radach	٧
	Radae	Ky Welding	LLC
	18650	NE 40th S	+
	Willist	on Florida City/State and Zip Code	32696
	Khlmr (C	Bembaramail	cation)
For further information co	ncerning this matter, please ca	11:	
Rathy Le	ee Radacky Person	at (<u>352)</u> <u>528</u> - Area Code Daytime	- 4657 Telephone Number
Enclosed is a check for the	e 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)

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

(Name of the Limited Lightlity Company as (A Florida Limited Liabil	of Mg LLC s it now appears on our records.) lity Company)
The Articles of Organization for this Limited Liability Company wer Florida document number <u>L 5 000 9 1036</u>	te filed on $1 - 6 - 15$ and assigned
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 C	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 registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent:	653 · C
New Registered Office Address:	Enter Florida street address
	omer Piorida Mreet daaress
	Cuy 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>	Name	Address	Type of Action
MGR	Kathy Leekadacky Trus	stee 18650NE 40th St	<u>·</u> □ Add
	ı	stee 18650NE 40th St williston, Fl. 32696	_ Remove
			Add
			□ Remove
			□ Change
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Filing Fee: \$25.00