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2019 AUG -2 PM 4: 08

C. GOLDEN AUG - 8 2019

COVER LETTER

Division of Co			
Nessco Gr SUBJECT:	roup, LLC		
		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Mordechai Feinstein		
		Name of Person	
	975 N Miami Beach Blvd	Firm/Company	
	North Miami Beach, FL 33	Address 3162	
	mordy@nesscogroupfl.com	City/State and Zip Code	
		to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	
Mordechai Feinstein		954 613-1215 at ()	
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	the following amount:		
S25.00 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

FILED

Nessco Group, LLC 2019 AUS -2 PH 4: 08 (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 $\frac{01/07/2016}{1}$ and assigned Florida document number L16000005656 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Nessco Construction, LLC 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

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>	<u>Name</u>	Address	Type of Action
			Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
		***************************************	Remove
			Change
		·	Add
			□ Remove
			☐ Change
			Remove
			Change
			Add
			☐ Remove
			Change

D. Jf ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff <u>Note:</u>	ve date, if other than the date of filing:
b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	7/26/2019
	Signature of a member or authorized representative of a member
	Mordechai teinstein