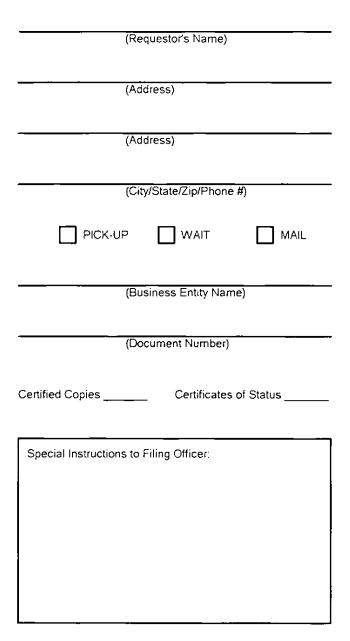
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COVER LETTER

TO:	Registration Se Division of Cor				
SUBJE		abian construction, Li	.C		
осы	.cr	Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		DILLON MUTO			
			Name of Person		
			Firm/Company		
91 MINNEHAHA CIR					
			Address		
MAITLAND, FL 32751					
City/State and Zip C DILLONMUTO@GMAIL.COM			City/State and Zip Code COM	 _	
		E-mail address: (to be used for future annual report notifi	cation)	
For fur	ther information c	oncerning this matter, please ca	all:		
DILLO	ON MUTO		407 637-7085		
	Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclose	ed is a check for th	he following amount:			
■ \$2:	5.00 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

IST FLORIDIAN CONSTRUCTION, LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.16000036780	were filed on 02/22/2016 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
FLORIDIAN CONSTRUCTION GROUP, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	91 MINNEHAHA CIR	
(Principal office address MUST BE A STREET ADDRESS)	MAITLAND, FL 32751	
Enter new mailing address, if applicable:	91 MINNEHAHA CIR MAITLAND, FL 32751	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action	
• 				
•			Remove	
			Change	
			Add	
			☐ Remove	
			□ Change	
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		10 mm
If the date inserted in this l	ust be specific and cannot be prior to date of filin	(optional) ng or more than 90 days after filing.) Pursuant to 605 y filing requirements, this date will not be liste
ecord specifies a delaye e 90th day after the re		tive time, at 12:01 a.m. on the earlie
JUNE 15 1	2017	
TA		
· / /KL/	Signature of a member or authorized represer	

Page 3 of 3

Filing Fee: \$25.00