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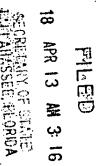
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COVER LETTER

Division of Corporations
SUBJECT: Lytle Construction LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Richard D Lytle Name of Person
Lytle Construction LLC Firm/Company
4766 Theodore Ave
Savasota FL 34233 City/State and Zip Code
Lyteconstruction LC on amail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard D Lytle at (813) 748-1038 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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

2 y + le Col	struction LLC Company as it now appears on our records.)
The Articles of Organization for this Limited Liability Cor Florida document number <u>L16 0000 4498</u>	npany were filed on 3/3/2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d 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 ADDRE	<u>ss</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	red office address on our records, <u>enter the name of the new</u>
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.

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
n langer	Merita Zendeli	4766 Theodore Ave Savasota FL 34233	
			□ Remove
			Change
manager	Richard Lytle	3ARSOTA FLOGER AVE	Q Add
			Remove
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amending any other information, enter change(s) here: (Attach ad	
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing te: If the date inserted in this block does not meet the applicable statutory to the date on the Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605. filing requirements, this date will not be liste
record specifies a delayed effective date, but not an effective 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlie
ed <u>4-9-18</u>	
Signature of a member or authorized representa	ative of a member
Richard Lytle Typed or printed name of signs	

Page 3 of 3

Filing Fee: \$25.00