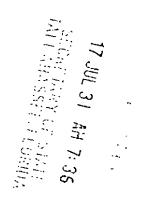
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COVER LETTER

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| CHDIE | cr. | LEO CONS | SULTING SERVICES LLC | | | |
| SUBJEC | CI: | | Name of Lim | ited Liability Company | | |
| The encl | losed | Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please re | eturn | all correspo | ndence concerning this matter | to the following: | | |
| | | | Gigy G. San Juan | | | |
| | | | | Name of Person | 1 | |
| | | | LEO Consulting Services. | LLC. | | |
| | | | | Firm/Company | | |
| | | | 14601 SW 83rd St. | | | |
| | | | | Address | | |
| | | | Miami, FL 33183 | | | |
| | | | | City/State and Zip C | ode | <u> </u> |
| | | | Gigy@LEOConsulting.net E-mail address: (| to be used for future an | nual report notifie | cation) |
| For furth | ner in | formation co | oncerning this matter, please ca | | | |
| Gigy G. | . San | Juan | | 786 at (| 493-8252 | |
| | | Name o | f Person | Area Code | Daytime | Telephone Number |
| Enclosed | d is a | check for th | ne following amount: | | | |
| \$25. | .00 Fi | iling Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing I Certified Cop (additional copy | ļy | □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | ING ADDRESS: | | EET/COURIE | |
| | | | ation Section n of Corporations | Divi | stration Section sion of Corpora | |
| | | | ox 6327 issee, FL 32314 | | on Building Executive Cen | ter Circle |
| | | | | | hassee, FL 323 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| LEO Consulting Services, LLC. | | |
|---|---|--|
| (Name of the Limited Liability Company (A Florida Limited Lia | y as it now appears on our records.) ability Company) | |
| The Articles of Organization for this Limited Liability Company w Florida document number 116000052209 | vere filed on 03/14/2016 | and assigned |
| This amendment is submitted to amend the following: | 3 | |
| A. If amending name, enter the new name of the limited liabili | ity company here: | |
| The Construction Specialist & Associates, LLC | ! | |
| The new name must be distinguishable and contain the words "Limited Liability | y Company," the designation "LLC" or the abbrev | iation "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 offi registered agent and/or the new registered office address here: Name of New Registered Agent: | | name of the new |
| New Registered Office Address: | Enter Florida street address | 7: 3 |
| | City Florida | Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change. | erformance of my duties, and I am fami ovided for in Chapter 605, F.S. Or, if th | iliar with and his document is d liability |
| | | |

| If amending or removed | g Authorized Person(s) authorized to n from our records: | nanage, <u>enter the title, name, an</u> | d address of each person being added |
|---------------------------|--|--|--------------------------------------|
| MGR = M AMBR = A | lanager uthorized Member | | |
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| . If am | ending any other information, enter c | change(s) here: | (Attach additional sh | eets, if necessary.) | |
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| (If an ef Note: | tive date, if other than the date of filin fective date is listed, the date must be specific an If the date inserted in this block does not a nent's effective date on the Department of | d cannot be prior to meet the applicabl | date of filing or more than | | |
| | cord specifies a delayed effective as 90th day after the record is filed | | an effective time, | at 12:01 a.m. on the earli | er of: |
| Dated | July 12 July 12 Signature of a | 2017 mamber or authorize | red representative of a me | ember | |
| | Gigy G. San Juan | | | | |

Page 3 of 3

Filing Fee: \$25.00