LIDDOC	57/1/1/02		
(Requestor's Name) (Address) (Address)	900284693459		
(City/State/Zip/Phone #)	04/18/1601038014 **25.00		
Certified Copies Certificates of Status	FILED 2018 APR 18 P 1: 03 SECRETARY OF JAIL TALLAHASSEE, FLORIDA		
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Naples Excava (Name of the Limited Liability Company)		s on our records)	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	bility Company)	<u>3 on our records.</u>)	
The Articles of Organization for this Limited Liability Company w	ere filed on	April 11, 2016	and assigned
Florida document number <u>L16000071662</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ty company he	ere:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the d	esignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<u></u>		
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, <u>enter the name of the new</u> registered agent and/or the new registered office address here: $\overline{\mathcal{P}}_{\mathcal{O}} \cong$

Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida O 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:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	<u>Type of Action</u>
MGR	Matthew D. Knaff	5640 Taylor Road, Suite 3	Add
		Naples, FL 34109	🛄 🛛 Remove
			Change
MGR	Matthew D. Knauf	5640 Taylor Road, Suite 3	🔼 🔀 Add
		Naples, FL 34109	🗆 Remove
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			Change
			Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Signature of a member or authorized representative of a member Matthew D. Knauf			Ŷ
Signature of a member or authorized representative of a member Matthew D. Knauf	Dated	April 15 2016	
Matthew D. Knauf		E W	
Matthew D. Knauf		Chita	
		Signature of a member or authorized representative of a member	
Typed or printed name of signee	_		
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