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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

REVOLUT	TONARY BUILDING SYSTE	MS L.L.C.	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PATRICK SEAN PHINNE	EY	
		Name of Person	
	REVOLUTIONARY BUIL	LDING SYSTEMS L.L.C.	
		Firm/Company	
	1803 FOLKSTONE ROAI)	
		Address	
	TALLAHASSEE		
		City/State and Zip Code	
	SPHINNEY1332@GMAIL		
		to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all:	
PATRICK SEAN PHIN	NEY	850 545-8479 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	atian
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REVOLUTIONARY BUILDING SYSTEMS L.L.C.

(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on JULY 12, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
REVOLUTIONARY CONSTRUCTION LLC		
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere	d office address on our records, <u>enter the</u>	2020 FEB 20 AM 9: 4 name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	_
	, Florid	
	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>	Name	Address	Type of Action
MGR WAYNER MILLER	13132 RINGNECK ROAD	🗀 Add	
		TALLAHASSEE, FL 32312	= Remove
			□ Change
		\ \ \ _Add	
			Remove
			Change
			□Add
			□Remove
			Change
			□Add
		□Remove	
		Change	
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		Remove	
		□Change	
		□Add	
		□Remove	
			□ Change

Page 2 of 3

z. 11 amenoing a	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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-	
	Marian
men er i e	
Note: If the dat	if other than the date of filing:
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ay after the record is filed.
Dated2 -	21-2020
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
PAT	RICK S. PHINNEY Typed or printed name of signee