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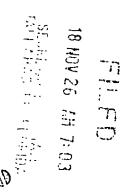
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Nubles Stumping, LLC Name of Cimited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeremiah Lance Nobles Name of Person
Nobles Stumping, LLC Firm/Company
10405 NW 3rd Street Address
Bristol, Fl. 32321 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Teremian Lance Nobles at (850) 447-2424 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (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

Nobles Sturn	
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number <u>LIVOO15748</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ted liability company here:
The new name must be distinguishable and contain the words "Limit	ited 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 ADDR	Bristol, FL 37321 = 5
(Frincipal office address WOST BE A STREET ADDR	
Enter new mailing address, if applicable:	10405 NW 3rd Street = I
(Mailing address MAY BE A POST OFFICE BOX)	Bristol, FL. 3232 1 3 3
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	tered office address on our records, enter the name of the new ress here:
Name of New Registered Agent: Je	remiah Lance Nobles
New Registered Office Address:	105 NW 37d Street Enter Florida street address
	Byjstol , Florida 37.37.1 City Zip Code
New Registered Agent's Signature, if changing Registered	

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 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				
MGR	Bobby J. Nobles Jr.	10196 NW Lake Mystic Rd					
	_	Bristol, FL 32321	Remove				
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Amend to Reflect	New	EIN	# A0	r Jere	mian L	ance
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ctive date, if other than the date of filir	ng:			(0	optional)	
effective date is listed, the date must be specific ar e: If the date inserted in this block does not	meet the ar	plicable stat				
ument's effective date on the Department of	State's reco	ords.				
ecord specifies a delayed effective	date, but	not an ef	fective ti	me, at 12:0)1 a.m. on t	he earlie
ne 90th day after the record is filed						
November 20	20	18				
November 20						
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Jerenich Land Signature of a	a member or	authorized rec	resentative (of a member		

Page 3 of 3

Filing Fee: \$25.00