L16000211555

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SUBJECT: BD	R OF FLOR	IDA LLC	
<u> </u>	Registration Section Division of Corporations ECT: BDR OF FLOHIDA LLC Name of Limited Liability Company Inclosed Articles of Amendment and fee(s) are submitted for filing. The return all correspondence concerning this matter to the following: William R GALLYAN SV. Name of Person Firm/Company 337 BENET LACE ROSE Address The All ASSES FLOREDA City/State and Zip Code bill Holaidae Classe Code bill Holaidae Classe Code Turther information concerning this matter, please call: Sin Galivan Name of Person at (855) Galivan Daytime Telephone Number		
The enclosed Articles of Ame	endment and fee(s) are submi	tted for filing.	
Please return all corresponder	ace concerning this matter to	the following:	
-	William R	GOLEVON SV. Name of Person	
		Firm/Company	
	337 BEAL	TEN LMG RUMP Address	
	TALLOHASS	City/State and Zip Code	
-	bill+hetail E-mail address: (10	be used for future annual report notification	in com
For further information conc	erning this matter, please cal	l:	
BIN GALIVA	rison	at (<u>650</u>) <u>933-</u> Area Code Daytime Te	4927
Enclosed is a check for the f	following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & 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

FIL	ED
2017 AUS 16	Pi. 3: 22
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BDR OF FWRIDA LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number L16000211555 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RCS CONTRACTING LLC.

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 ADDRESS) 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, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 = A $AMBR = A$	Aanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Note: If the da	ite inserted in this	he date of filing: must be specific and block does not me Department of St	eet the applicable	late of filing or more e statutory filing r	(optio than 90 days after equirements, this	nal) filing.) Pursuant to 605.020' date will not be listed as
ne record sp The 90th o	ecifies a delay day after the r	ed effective da ecord is filed.	ate, but not a	n effective tin	ne, at 12:01 a	.m. on the earlier c
Dated	/16/1-	Signature of a m				

Page 3 of 3

Filing Fee: \$25.00