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	ARTICLES OF	AMENDMENT	
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	ARTICLES OF	ORGANIZATION	FILES
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			201/DEC 13
Ke	nyon Marine (Construction L	FILED 2017 DEC 13 PM 3:57 LC SECRE FARY OF STATE cords.) ALLAHASSEE. FLORID:
(<u>Nai</u>	me of the Limited Liability Comp (A Florida Limited	any as it now appears on our re- Liability Company)	CORDS. ALLAHASSE OF STATE
		······································	FLORIN.
The Articles of Organization for t	is Limited Liability Compan	y were filed on November	18,2016 and assigned
Florida document number	000212001		
This amendment is submitted to a	i mend the following:		
A. If amending name, <u>enter the</u>	new name of the limited lia	bility company here:	
NA		· · ·	
The new name must be distinguishable a	nd contain the words "Limited Liab 	oility Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices add	ess, if applicable:	NA	
(Principal office address MUST	BE A STREET ADDRESS)		
//////////////////////////////////////			
Í			
Enter new mailing address, if a	-	N)A	
(Mailing address MAY BE A PO.	<u>ST OFFICE BOX)</u>	· ····	
	0		ords, enter the name of the new
registered agent and/or the new	registered office address ne	<u>re</u> :	
Name of New Registered	<u>d Agent:</u> <u>N A</u>		
New Registered Office/	\ddress:		
		Enter Florida street ad	<i>ldress</i>
			, Florida
	<u></u>	City	Zip Code
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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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u>

MGR = Manager AMBR = 'Authorized Member

<u>Title</u>	Name			Address	Type of Action	i
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				Jacksonville FL 32210	Remove	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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		SECRETARY OF STATE TALLAHASSEE. FLORIDA
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(If an ef <u>Note:</u>	If the date inserted in this	he date of filing: (optional) hust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
	cord specifies a delay 90th day after the r	 red effective date, but not an effective time, at 12:01 a.m. on the earlier of: ecord is filed. -
Dated	December	12 2017

Date -14 Signature of a member or adthorized representative of a member Matthew E. Kenyon Typed or printed name of signee Page 3 of 3 Filing Fee: \$25.00