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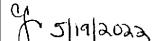
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2022 MAY 18 PM 2: 11

RECEIVED



COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Testament (Name of Linn	onstruction Sted Liability Company	services LLC
The enclosed Articles of A	Amendment and fee(s) are sub-	nutted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Thomas	Roberts Name of Person	
		Firm/Company	
	16824 /	Mallan Dr Address	
		ChryState and Zip Code 5 4 90 5 pcl 6 9 ma o be used forthulure annual_report r	
For further information ed	incerning this matter, please co		
Th()Ma(Person	at (<u>\$\frac{\fint}{\fint}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fint}{\fint}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fintitilef{\frac{\fint}{\frac{\frac{\fint}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fin}}}}{\frac{\frac{\frac{\frac{\fir}}}}{\frac{\frac{\frac{\frac{\fin}}{\fint}}}}}}{\frac{\frac{\frac{\fin}{\frac{\frac{\frac{\finititititititititititititititititititi</u>	time Telephone Number
Enclosed is a check for th	e following amount:		
it \$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO

2027 AM 9:33 ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Li	orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili Florida document number <u>L1700006</u> 6		and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	'Limited Liability Company," the designation "LLC" or the abl	breviation "L.L.C"
Enter new principal offices address, if applicables		-
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or regist agent and/or the new registered office address he	ered office address on our records, <u>enter the nam</u> re:	e of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	Cin:	Zio 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>	<u>Name</u>	Address	Type of Action
AMBIT	Michael Lee	3013 S. Adams St	□Add
		Tallahassee, FL 32301	(ERemove
			□Change
AMBR	Douglas Carres Jr.	4633 Beach Rilge Rd	[V.Add
		Lak Port, NY 14094	□Remove
			🗀 Add
			□Remove
			□Change
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		-	□Remove
			□Change

Fective date, if other than the date of filing: In effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020. In the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as comment's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the is filed. Sugnature of a member or authorized representative of a member. Thomas Roberts Typed or printed name of signee.		
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