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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Which Construction, U.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Unchard Name of Person
Lynch Construction, LC
2474 Sanford Ave
Sanford, Fl. 32771 City/State and Zip Code
the lunch construction egmon. Com
For further information concerning this matter, please call:
Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certificate of Status S60.00 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

2017 OCT 25 AM 11: 07

(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 Liabil	lity Company were filed on	F106/811/1	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, <u>enter the new name of the</u>		<u>y here</u> :	
The new name must be distinguishable and contain the words	"Limited Liability Company,")	the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		i
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO. B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered office address	on our records, <u>enter th</u>	he name of the new
Ni na Barrian na 1007 na 111 na			_
New Registered Office Address:	Enter	· Florida street address	
		, Florida	
-	City	,	Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:		
I hereby accept the appointment as registered a provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	ind complete performance red agent as provided for istered office address, I h	e of my duties, and I am far in Chapter 605, F.S. Or, if	miliar with and Tthis document is

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

Title Name **Address Type of Action** MGR James Barnett 745 Ba ☐ Change MER Michael Lynandid 2474 ☐ Change □ Remove ☐ Change □ Add _□ Remove ☐ Change □ Add ☐ Remove _□ Change

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