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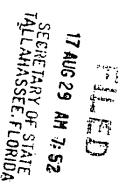
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| Special Instructions to | Filing Officer:    | ı          |
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08/29/17--01024--022 \*\*25.00



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| Templar Contracting, LLC  (Name of the Limited Liability Compa (A Florida Limited)   | nny as it now appears on our reco<br>Liability Company) | ords.)                           |
|--|---|----------------------------------|
| he Articles of Organization for this Limited Liability Company lorida document number $\frac{L17000101971}{L17000101971}$ .                      | were filed on 5/23/17                                   | and assigned                     |
| his amendment is submitted to amend the following:   |   |                                  |
| . If amending name, enter the new name of the limited liab   | ility company here:                                     |                                  |
| ne new name must be distinguishable and contain the words "Limited Liabi   | lity Company," the designation "Ll                      | LC" or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable:   | 9918 State Road 52                                      | ·                                |
| Principal office address MUST BE A STREET ADDRESS)   | Hudson, FL 34669  | SEG SEG                          |
| nter new mailing address, if applicable:   | 9918 State Road 52                                      | NG 29 A                          |
| Mailing address MAY BE A POST OFFICE BOX)  | Hudson, FL 34669  | F SIA                            |
|  |   | RPA en O                         |
| If amending the registered agent and/or registered of gistered agent and/or the new registered office address her  Name of New Registered Agent: |   | ds, <u>enter the name of th</u>  |
| New Registered Office Address:   |   |                                  |
| 110 H Registered Office Padices.   | Enter Florida street addr                               | ress                             |
|  |   |                                  |
|  | , I   | Florida<br>Zip Code              |

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

| $\mathbf{AMBR} = A$ | Authorized Member |              |                |
|---------------------|-------------------|--------------|----------------|
| <u>Title</u>        | <u>Name</u>       | Address      | Type of Action |
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|                                    |   |                 |                             | 8/25/17      |               |               |             |                           | _                          |           |                          |
| l <b>fective d</b><br>an effective | late, if other the date is listed, the  | date must be sp | of filing:<br>ecific and ca | annot be pri | or to date of | filing or mor | than 90 day | (option:<br>ys after fil: | al)<br>ing.) Pursu         | ant to 60 | 05.0207                  |
| lote: If th                        | e date inserted is effective date of    | n this block d  | oes not mee                 | et the appl  | icable stat   | itory filing  | equiremen   | ts, this d                | ate will n                 | ot be lis | sted as                  |
|                                    | , circuit date (                        | in the Bepare   |                             | ie s record  |               |               |             |                           |                            |           |                          |
| e record                           | specifies a c                           | lelayed eff     | ective dat                  | te, but n    | ot an ef      | ective tin    | ne, at 12   | :01 a.n                   | n. on th                   | ie earl   | ier of                   |
| The 90t                            | th day after t                          | he record i     | s filed.                    |              |               |               |             |                           |                            |           |                          |
| . 8/25                             | /2017                                   |                 | A                           |              |               |               |             |                           |                            |           |                          |
| ated                               |   |                 | <del>-//</del> }            | 1            | ·             |               |             |                           |                            |           |                          |
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00