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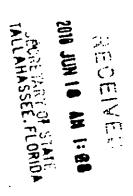
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## **COVER LETTER**

• •	istration Section ision of Corporations		
SUBJECT:	McYenze Constru Name of Limi	uction Enterpreted Liability Company	ises I.C.
The enclosed	Articles of Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspondence concerning this matter t	to the following:	
	Greg McKe	POZ'C Name of Person	
	McKenzieCox	1 Struction Enter	FPISES LLC
	20506 Sp	res Avenue Address	
		L FL 32413 City/State and Zip Code	
	SVINSON E-mail address: (t	O be used for future annual report notifica	tion)
For further in	nformation concerning this matter, please ca	n:	
Corea	Mckenze	at ( <u>850)</u> <u>814 - C</u> Area Code Daytime T	0920
	name of Ferson	Area Code Daytine F	erepnone Number
	check for the following amount:		
<b>E</b> \$25,00 F	iling Fee	□ \$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**

(A Florida Limited Li	ability Company)	
The Articles of Organization for this Limited Liability Company we Florida document number <u>L17000140189</u> .	vere filed on $\frac{\sqrt{\rho/20/2017}}{2000}$ and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "L.L.C." 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)  3. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:	ice address on our records, enter the name of the	
	7 B	- )
New Registered Office Address:	Enter Florida street address	-
	inter initial street data (SS	
	, Florida	-
San Davidson Association Standards Standards School Davidson Associa	саў груска	
New Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent and agree	e to act in this capacity. I further agree to comply with i	the

## 3

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
MGR	Glenn W. Austin	6632 Lazy Acre Rd	<b>08</b> Add
		12632 Lazy Acre Rd P.C. Beach, FL 32413	□ Remove
			Change
			Remove
			Change
			Remover,
			□ Add  Remove;  Change
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Typed or printed name of signee

Filing Fee: \$25.00