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CHID ITZ						
SUBJEC	· <u> </u>	Name of Limit	ed Liability Company			
Please reti	irn all correspoi	ndence concerning this matter to	o the following:			
		Nabil Joseph, Esq.				
			Name of Person			
		Law Office of Conrad Willi	comm. P.A.			
Name of Person Law Office of Conrad Willkomm, P.A. Firm/Company 3201 Tamiami Trail N., 2nd Floor Address Naples, Fl. 34103 City/State and Zip Code nabil@swfloridalaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nabil Joseph 239 262-5303 at (
		3201 Tamiami Trail N., 2nd Floor				
		Address				
		Naples, FL 34103				
		nahil/ðewtlaridalav cam	City/State and Zip Code			
		-	be used for future annual report no	tification)		
For further	r information co	oncerning this matter, please cal	II:			
Nabil Jose	eph					
	Name of	Person	Area Code Daytii	me Telephone Number		
Enclosed i	s a check for th	e following amount:				
\$25.00) Filing Fee		Certified Copy	☐ \$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

SCOTT RYAN BUILDERS LLC	
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	s it now appears on our records.) htty Company)
The Articles of Organization for this Limited Liability Company wer Florida document number $\frac{1.17000185589}{1.17000185589}$.	re filed on and assigned
This amendment is submitted to amend the following:	
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 C	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
_	二
Enter new mailing address, if applicable:	5
(Mailing address MAY BE A POST OFFICE BOX)	
_	2:
	- 1 8
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is eing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

City

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	Harry Bandinel	42881 Lake Babcock Drive, Suite 200. Babcock Ranch, FL 33982	
			D Remove
			Change
			DAdd
			☐ Remove
			□ Change
			D Add
			□ Remove
			□ Change
			🗆 Add
			☐ Remove
			☐ Change
			
			□ Remove
			Change
			□ Remove
			□ Change

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
reffecti te: If t	date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
ed	2019. Shipping of a member of authorized representative of a member.
	Signature of a member or authorized representative of a member

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