# L17000212465

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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DEC 10 2021



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2021 NOV 24 AM 9: 23

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## **COVER LETTER**

Division of Corp		, A	
SUBJECT: <del>Pæl</del>	emphon (E) Name of Limit	INSTRUCTON LA	<u>'</u>
The enclosed Articles of A	imendment and fee(s) are sub-	mitted for filing.	
	dence concerning this matter		
	Kenneth	R. Walker	
	Ledempho	n Construction Firm/Company	1 JUC
	54060	Paddock C	<i>-f.</i>
	<u>Callahan</u> Kundkan	City/State and Zip Code  LISCI DE GUN o be used for Juture annual report notifi	20// 20// com
	E-mail address: (i	to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please ca	all:	
Kenneth	Ublker	at ( <u>90</u> 4) <u>325</u> -	-8674 Telephone Number
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	: following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

	OF	2021 NOV 24 AM 9: 23
Redemption (Enstruc) (Name of the Limited Limitity Com (A Florida Limite	pany as it now appears on it it is company)	SECRETARY OF STATE
The Articles of Organization for this Limited Liability Compar Florida document number <u>L17000212465</u> .	ny were filed on	0/13/17 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	54060 Callahar 33011	Addack ct.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	54060 Glahur 3201	Problock ct.
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our recoi	rds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address

### 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.

Cin

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
Di <u>ractor</u>	Jossica Walker	381 Drone St.	□Add
		381 Drone st. Jacksonville, Florida	<b>1 №</b> Remove
		32018	
			□Add
			□Remove
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(If an eff	ive date, if other than the date of filing:
he recor ord is fi	d 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 led.
Dated	November 22 . 2021.
	Signature of a member or authorized representative of a member
	Konneth Walker Typed or printed name of signee