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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: COWSTruction Pluse L.L.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: Richard Rome Ome Ome
Cowstruction Pluse L.L.C.
Address Chattachooee 32442 City/State and Zip Code City/State and Zip Code Fichard vome vo 01 (a) line. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard Romero at (950) 209-4596 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status 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

CONSTRUCTION	J 7/08	e 16	<i>C</i> .		
COWS Truc Trop	Liability Company A Florida Limited Lia	as it now appears o bility Company)	h our records.)		-
The Articles of Organization for this Limited Lia Florida document number <u>L 7000715</u>	bility Company w	ere filed on	117/17	and	assigned
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited liabili	v company here	:		
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the design	gnation "LLC" or	the abbreviation	"L.L.C."
Enter new principal offices address, if applical	ble:			5. 2	
(Principal office address MUST BE A STREET	ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox)</u>			M - 6 A 4 59	
B. If amending the registered agent and/o registered agent and/or the new registered offi		ce address on o	ur records, <u>e</u>	nter the nan	ne of the nev
Name of New Registered Agent:	Richard	I Rome	0		
New Registered Office Address:	509	T405 Enser Florida	S /		_
	Chattac	City	, Florid	la <u>32 4</u> Zip Co	4 <u>2</u>

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.

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
mbR_	Richard Romero	509 TYUS St	Add
		509 TYUS St Chettacho	ecf Remove
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			Add
			Remove
			□ Change
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		HASSEE.	. G□ Remove
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	5-6. J	nature of a mem	ber or authori	zed representati	ve of a member			_

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Filing Fee: \$25.00