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COVER LETTER

TO: Registration So Division of Cor				
SUBJECT: DUC	K&CO. Home	E INSPECTIONS ited Liability Company	LLC	
	Name of Lim	ited Liability Company	- /	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	THOMAS W	Mane of Person		
	Duck & co. He	Firm/Company	VIS, LLC	
	188 W HARBON	RVIEW RD. Address		2024 Ji
		BEACH, FL 3241 City/State and Zip Code		2024 JUL 11 AM 9: 19
	tom@stropp E-mail address: (PEF. COM to be used for future annual report notif	ication)	9: 1
For further information c	concerning this matter, please c	all:		ف ن
THOMAS W	illard	at (334) 799-4	L893	
	of Person	at (334) 799-4 Area Code Daytime	Telephone Number	
Enclosed is a check for the	he following amount:			
X S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is er	itus &
Mailing Addres Registration S		Street Address: Registration Sec	tion	
Division of C		Division of Con	porations	
P.O. Box 632 Tallahassee, 1		The Centre of T	allahassee Street, Suite 810	
ranunasce,		ZTIJ D. WOHIO	Direct patte oro	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DUCKS CO. HOME INSPECTIONS, LLC

(<u>Name of the Limited Lia</u> (A Flo	hility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L17000 2570</u>	y Company were filed on 12/18/2017 and assigned 33.
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the l	imited liability company here:
SPINN AKER TASPEC	Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET AD	DRESS)
	2024 (1.11
Enter new mailing address, if applicable:	() () () () () () () () () ()
Mailing address MAY BE A POST OFFICE BOX)	
	9 9
B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	unter r toriaa street aaaress
	, Florida
	Cuy Zip Code

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
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