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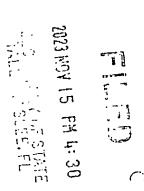
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(Address)
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COVER LETTER

Division of Cor	rporations			
SUBJECT: <u>G</u>	General Cons	Struction and ited Liability Company	Solutions LLC	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Genn	Reed Name of Person		
	GI General	Constauction a	nd Solutions IL	C
	2400 G	ulf Winds	Dukt_	
	Kissimn	nee FL 347	146	
	iakovys E-mail address:	hyn@gmail.	COW)	
For further information of	concerning this matter, please ca	9	2023 NG	1
Gem.	Reed	at (<u>407</u>) <u>973</u> Area Code Daytim	7349 Telephone Number Spanish	Parameters FOL ES 1 1 1 1 1 1 1 1 1 1 1 1 1
Name o	or reison	Area Code Dayumi	The relephone Number of the second se	
Enclosed is a check for t	he following amount:		FLE 31	6
□ \$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)	

Registration Section

TO:

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

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G.I. General Construction and Solutions ILC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on $02/12/20/8$ and assigned Florida document number $2/8000038757$.
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 Company," the designation "LLC" or the abbreviation "L.L.C."

The new name must be distinguishable and contain the words	Chimited Liability C	ompany, the designation LL	or the abbrevia	10n L.L.	. .
Enter new principal offices address, if applicable		2400 Gulf		Cou	12+
(Principal office address MUST BE A STREET A		Kissimmee FL 34746			
	_				
Enter new mailing address, if applicable:		same			
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u> _				
B. If amending the registered agent and/or regis	 stered office addi	ress on our records, enter	r the name of t	202new i	 registered
agent and/or the new registered office address h	<u>ere</u> :		[] [] 	NON I	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name of New Registered Agent:	Genn	Reed	in the second se	<u></u>	1 571
New Registered Office Address:	2400 G	ulf Winds	Cour	7 = =	
	Kicein	Enter Florida street addre	, , , , , , , , , , , , , , , , , , , 	317	2 C
	14 16614	71/1/4 P		T 7	6

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
MGR	Cjennadii Takovyshyn	429 Sheoah Blud	□Add
		Apt. 4, Winter Spring	<u>J</u> , ⊠Remove
		FL 39708	□Change
MGR	Cenn Reed	2400 Gulf Winds Coy	2/iXAdd
		Kissimmee_	□Remove
		FL 34746	DChange
			□Add
			Remove
			DRemove
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ffective date, if otl	her than the date of filin	19:		(optiona	,	
an effective date is listed to the listed insection in the date insection.	ed, the date must be specific an erted in this block does not date on the Department of	nd cannot be prior to d meet the applicable	ate of filing or more tha	ın 90 days after filir	ng.) Pursuant to 6	505.020 isted as
,-	clayed effective date, but no	ot an effective time,	at 12:01 a.m. on the	earlier of: (b)	The 90th day at	fter the
d is filed.	0/2023	. 9-00 AI	n			
d is filed.	0/2023	. 9-00 AI	N			
d is filed.	0/2023 Signature of a	9-00 AI	M d representative of a n	nember		