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Amend Klame

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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Cor	porations		
suвлест: <u>Еро</u>	xy Designs L Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Brandon	Shaw Name of Person	<u>. </u>
		Firm/Company	
	13405 Pine	Needle Un Address	
	Fort Myer Southerns E-mail address:	City/State and Zip Code Wfl @ g mail. Com to be used for future annual report noti	fication)
For further information co	oncerning this matter, please co		
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
\$25.00 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 Status & Certified Copy (additional copy is enclosed)
Registr	ING ADDRESS: ation Section n of Corporations	STREET/COURI Registration Section Division of Corpor	n

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TO ARTICLES OF O	DCANIZATION &
ARTICLES OF O	
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records)
(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company	were filed on MAY 21, 2018 and assigned
Florida document number L18000150132	**************************************
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company hore
	·
Southern Concrete & Epox The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	16790 John Morris Kd
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33908
	icaga Ti wa . Bi
Enter new mailing address, if applicable:	16790 John Morris Rd Fort Myers, FL 33908
(Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, FL 33908
B. If amending the registered agent and/or registered of	ice address on our records, enter the name of the new
registered agent and/or the new registered office address here	:
N 6N 5 1	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	ону гар соце

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
			□ Add
		-	□ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
			
			☐ Remove
			☐ Change

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•	
Note:	ive date, if other than the date of filing:
he re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	November 15th, 2018
	November 15th, 2018
	Signature of a member or authorized representative of a member
	Brandon Shaw
	Typed or printed name of supers

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Filing Fee: \$25.00