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SECRETARY OF STATE

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JUL 1 () 2018

COVER LETTER

TO:		istration Sec ision of Corp			
		PALMERA	CONSTRUCTION CO LLC		
SUBJ	ECT:		Name of Limi	ited Liability Company	······································
The ci	rclosed	l Articles of Z	Amendment and fee(s) are sub-	mitted for filing.	
Please	return	all correspor	ndence concerning this matter	to the following:	
			CHADWICK A WRIGHT		
				Name of Person	
			PALMERA CONSTRUC	TION CO LLC	
				Firm/Company	
			6121 PIMLICO CT		
				Address	
			TALLAHASSEE FL 3230	9	
			,	City/State and Zip Code	
			PALMERACONSTRUCTI	-	· · · · · · · · · · · · · · · · · · ·
				to be used for future annual report	notification)
For Iu	rther ir	normation co	oncerning this matter, please ca	311 :	
CHA	OWIC	KA WRIGH	Т	at (813) 39	Viline Telephone Number
		Name of	Person	Area Code Da	ytime Telephone Number
Enclo:	sed is a	check for the	e following amount		
■ \$2	25,00 F	iling 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)

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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAMERA CONSTRUCTION CO LLC

(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 $_{\perp}$ \mathcal{D} \mathcal{L} Florida document number L18000159678 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 "L.L.C" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here: 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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	CHADWICK A WRIGHT	6121 PIMLICO CT TALLAHASS	b Add
			□ Remove
			□ Change
		//	Add
			☐ Remove
			☐ Change
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e date, if other than the date of filing:	(optional)
tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 the date inserted in this block does not meet the applicable statutory filing requiren	tays their tiling.) Fulsuant to 605.0 nents, this date will not be listed
it's effective date on the Department of State's records.	
rd specifies a delayed effective date, but not an effective time, at	12:01 a.m. on the earlie
Oth day after the record is filed.	
7/03/2018	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00