Division of Corporations

Hop. 1014: Florida Department of Stalle

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(((H190000566473)))



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Division of Corporations

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Kmail Address: Kolyosppassispisson

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONSIDER IT DONE CONSTRUCTION, LLC

Certificate of Status	0
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Page Count	04
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HO.735 #002

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Consider It Done Construction, LLC		
(Name of the Limited	Linhility Company as it now appear	s on our records.)	
(.	A Florida Limited Liability Company)		
The Articles of Organization for this Limited Lia	bility Company were filed on	September 28, 2018	and assigned
Florida document number L18000231182	·		
This amendment is submitted to amend the follow	øjng;		
A. If amouding name, enter the new name of	the limited liability company he	<u>re</u> :	
Consider It	Done Construction of Florida, ULC		
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the de	esignation "LI C" or the all	
Enter new principal offices address, if applica	ble:		A TI
(Principal office address MUST BE A STREET	ADDRESS)	<u> </u>	. 00
Enter new mailing address, it applicable:			9 HO S
(Mailing address MAY BE A POST OFFICE E	<u></u>	· · 	10 00
B. If amending the registered agent and/or the new registered off	or registered office address on ice address here:	our records, enter	the name of the new
Name of New Registered Agent:		<u>.</u>	
New Registered Office Address:	Enter Flor	ida street address	
		Florida	
	Chy	,	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

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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	Bruce E. Burkey	218 Bast Bearss Avenue #247	B Add
		Tampa, FL 33613	□ Remove
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. If amending any other information, enter change(s) here: (Attach additional sheets, if necessur	y) 		
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Effective date, if other than the date of filing: (optional (if an effective date is listed, the date ontar he specific and cannot be prior to date of filing or more than 90 days after filing Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.) g.) Parsaunt to (g will not be i	605.0207 isted as	(3)(b) the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. b) The 90th day after the record is filled.	, on the ear	rlier of	:
Dated			
Keith Owens Date: 2019.02.18 15:51:18 -05'00' Signature of a member of authorized representative of a member		21	
Signature of a incinder of authorized representative of a incender	Z S	9191	
Keith C. Owens	<u> </u>	2019 FEB	
Typed or printed name of signee		19	emitan
0 2 52	in 's		
Page 3 of 3	in to	AM 10:	
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