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COVER LETTER

Division of Co			
	L BUILT GERERAL CONTRA	CTING FIRM LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	AUSTIN NOWELL		
	AUSTIN NOWELL Name of Person Firm/Company 6452 STONEY POINT RD Address PANAMA CITY, FL 32404 City/State and Zip Code FRIENDLYCORPORATEFILING@GMAIL.COM E-mail address: (to be used for future annual report notification) information concerning this matter, please call: NOWELL 850 348-0405 at (
	6452 STONEY POINT RD	Firm/Company 6452 STONEY POINT RD Address	
	PANAMA CITY, FL 32404	Address	
	FRIENDLYCORPORATEFII	City/State and Zip Code LING@GMAIL.COM	
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please concerning	ali:	
AUSTIN NOWELL			
Name	of Person		Telephone Number
Enclosed is a check for	the 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)

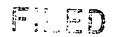
MAILING ADDRESS:

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, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 附品 22 PM 4: 32

NOWELL BUILT GERERAL CONTRACTING FIRM LLC

(Name of the Limited Liability Company as it now appears on our records:)

(A Florida Limited Liability Company)

for this Limited Liability Company were filed on 11/05/2018 and as

The Articles of Organization for this Limited Liability Company were filed on 11/05/2018 ____ and assigned Florida document number L18000259325 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NOWELL BUILT GENERAL CONTRACTING LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 name of the new 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□ Remove
			☐ Change
			Add
			Remove
	:		☐ Change
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f an effective date Note: If the da	, if other than e is listed, the date te inserted in thi ective date on th	must be specific is block does no	and cannot be of meet the a	pplicable statu		ian 90 days aft		
	ecifies a dela lay after the			t not an eff	ective time	, at 12:01	a.m. on th	e earlier of
The 90th d	20-19	·	<u> </u>	·				
The 90th d	20-19	Luctor Signature o	Navo Ta member or	authorized ren	esentative of a	member		

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Filing Fee: \$25.00