4/17/2019



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To:

Division of Corporations

Fax Number : (

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From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WILTSE CONSTRUCTION AND INSPECTION, LLC

Certificate of Status	0
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COVER LETTER

FO: Registration Sec Division of Corp			
SUBJECT: WILTSE C	CONSTRUCTION AND INS	PECTION, LLC	
	Name of Limit	ed Liability Company	
The enclosed Articles of a	Amondment and fee(s) are subm	sitted for filing.	
lease return all correspo	ndence concerning this matter to	o the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Fim/Company	,
	101 N. Brand Blvd., 11th	Floor	
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	DrewWillsel151@gmail.	com o be used for future annual report notific	×úon)
For further information c	concerning this matter, please co		,
Cheyenne Moseley	-	800 773-0888 ext	t. 9724
Name o	t Person	at ()	l'elephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	S30.00 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 enclose
	ING ADDRESS:	STREET/COURIE Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tailahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WILTSE CONSTRUCTION AND INSPEC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on o	ur records)
The Articles of Organization for this Limited Liability Com-	pany were filed on 1708/2	and assigned
Florida document number L18000262001		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limiter	l liability company here:	
The new name must be distinguishable and end with the words "Limite	al Liability Company," the design	nation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	المالية	and the second s
(Principal office address MUST BE A STREET ADDRES	<u>zz)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		and the second s
	192-191	
B. If amending the registered agent and/or registered agent and/or the new registered office address	red office address on our schere:	r records, enter the name of the ne
Name of New Registered Agent:		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••	
New Registered Office Address:	Enter Florula s	treet address
	Florida	
- vern qui ni	City	, Florida
New Registered Agent's Signature, if changing Registered /	Auent:	

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

To Page 5 of 6

MGR = Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = Authorized Member Type of Action Address Title Name 16643 COUNTY ROAD 672 MGR WILT'SE, MARY A LITHIA, FL 33547 **☑** Remove MGR Wiltse, Mary Anne 16643 COUNTY ROAD 672 **⊠** ∆dd LITHIA, FL 33547 ☐ Remove Add ☐ Remove ☐ Remove ____ □ Remove

Dated	April 4 , 2019.	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	Drew Wiltse	
	Typed or printed trans of signer	

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Filing Fee: \$25.00