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SURIFC	1113 Holdi	ings, LLC				
SUBJEC	· • · · · · · · · · · · · · · · · · · ·	Name of Lim	ited Liability Company			
The encl	nsed Articles of	Amendment and fee(s) are sub	mitted for filing			
		ondence concerning this matter	-			
		Craig Tompkins, Esq.				
			Name of Person	· · · · · · · · · · · · · · · · · · ·		
		Craig Tompkins, PLLC				
			Firm/Company			
		2269 Acorn Palm Rd				
			Address			
		Boca Raton, FL 33432				
		City/State and Zip Code				
		ct@craigtompkins.com				
For furth	er information c	E-mail address: (concerning this matter, please or	to be used for future annual report not all:	ification)		
Craig To	ompkins		561 271-4868			
	Name o	of Person	Area Code Daytin	ne Telephone Number		
Enclosed	is a check for t	he following amount:				
\$ 25.0	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 Addres		Street Address:			
	Registration : Division of C		Registration So Division of Co			
	P.O. Box 632		The Centre of			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11-13 Holdings, LLC (Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co. Florida document number L18000268702	ompany were filed on November 16, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
Fiberglass Tapered Rods, LLC	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "Ll.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	ESS)
Enter new mailing address, if applicable:	DEC -6 P
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City 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

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
			□Remove
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			Change

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed. December 5 , 2022 . Signature of a member or authorized representative of a member.		
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