L190000 26675

(Re	questor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO:	Registration Se Division of Cor			
cup ir		CONSTRUCTION, LLC		
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		BRYAN YANCEY		
		YANCEY CONSTRUCTIO	Name of Person N. LLC	
		3361 CITRINE CIR	Firm/Company	
		CRESTVIEW, FL 32539	Address	
		YANCEYCONSTRUCTION	City/State and Zip Code LLC@GMAIL.COM	
		E-mail address: (to be used for future annual report notif	ication)
For furt	her information c	oncerning this matter, please co	all:	
BRYA	N YANCEY		321 474-3515	
	Name o	f Person		: Telephone Number
Enclose	d is a check for th	ne 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)

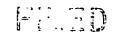
MAILING ADDRESS:

TO:

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 HAY 20 PH 3: 23

YANCEY CONSTRUCTION, 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 L	Liability Company were filed on JA	ANUARY 25, 2019	and assigned
Florida document number L19000026675	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company h	ere:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		<u> </u>
		· n	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and registered agent and/or the new registered of		n our records, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:	BRYAN YANCEY		
New Registered Office Address:	3361 CITRINE CIR		
·	Enter Flo	rida street address	
	CRESTVIEW	Florida ³²⁵³	J9
	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, Manature 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>	<u>Address</u>	Type of Action
MGR	KIMBERLY YANCEY	3361 CITRINE CIRCLE CRESTVIEW, FL 32539	
			□ Remove
			■ Change
AMBR	BRYAN YANCEY	3361 CITRINE CIRCLE CRESTVIEW, FL 32539	
			☐ Remove
	JAMES WAITES	208 SHELL AVE	
MBR ———		FORT WALTON BCH, FL 32548	
			□ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			Change
			□ Add
			□ Remove
			Change

OWNER								
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ective dat	e, if other	than the day	e of filing:		en dans of fills		(optional)) g.) Pursuant to 605.02
<u>e:</u> If the c	ate inserted	in this block	does not me	et the applic	able statutory	g or more than 9 / filing require	o days after ming ments, this date	g.) Pursuant to 605.02 will not be listed
ument`s e	fective date	on the Depai	tment of Sta	ite's records	•			
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recora s he 90th	day after	the record	rective da is filed.	ite, but no	ot an effect	ive time, at	12:01 a.m.	on the earlier
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ed	MAY	2019	, 			2)	
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				-	THE KIND			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00